

# SITE PLAN / SPECIAL PERMIT APPLICATION

WESTPORT PLANNING and ZONING COMMISSION

FOR OFFICE USE ONLY

- SITE PLAN
- SPECIAL PERMIT & SITE PLAN
- CAM SITE PLAN

Application # PZ-26-00138  
Submission Date: 3/16/26  
Receipt Date: 3/16/26  
Fee: 660

1. Property Address (as listed in the Assessor's records) 185 Main Street, Westport, CT 06880
2. Property ID# (9 Digits - staff will provide) 9157 Zone: A
3. This property is connected to:  Septic or  Sewer
4. Does this project involve demolition of structures 50+ yrs old or more?  No  If Yes = Visit HDC Rm 108, 341-1184.
5. Applicant's Name Acadia Realty Trust Daytime Tel # \_\_\_\_\_  
Applicant's Full Address 411 Theodore Fremd Avenue, Suite 300, Rye, NY Zip Code 10580  
E-Mail \_\_\_\_\_

NOTE: Below List Owners (if more space needed submit list.)

6. Property Owner's Name Acadia Realty Trust Daytime Tel # 914-288-2153  
Property Owner's Address \_\_\_\_\_ Zip Code: 10580  
E-Mail \_\_\_\_\_
7. Agent's Name (if different) RACE Coastal Engineering c/o Azure Dee Steicher Daytime Tel # 203-377-0663  
Agent's Address 611 Access Road, Stratford, CT Zip Code: 06615  
E-Mail \_\_\_\_\_
8. Zoning Board of Appeals \_\_\_\_\_
9. Existing Uses of Property: Commercial

10. Describe Proposed Project:  
**Replace two sections of failed seawall which are approximately 16' and 22' long. Check any voids within the face of the remaining sections of seawall for restabilization and long-term maintenance purposes.**

11. For Special Permits, please indicate the Special Permit Use and the specific section of the Zoning Regulations requiring a Special Permit for this use: N/A

12. This property  Is  Is Not within 500 feet of an adjoining municipality.

13. List your Estimated time needed for your presentation at hearing: Approx. 15 Minutes  
The P&Z Director, his/her designee, or the P&Z Commission may require an applicant to pay for hiring one or more outside consultants to assist the P&Z staff and Commission in analyzing, reviewing and reporting on areas requiring technical review.

I hereby certify that the above information is correct and that I have submitted herewith all of the pertinent documentation required by the zoning application.

[Signature]  
Applicant's Signature (If different than owner)

[Signature]  
Owner's Signature (Must be signed 1)

1. If the applicant is unable to obtain the signature of property owner, a letter of authorization signed by the property owner may be submitted instead, as per §43-3.3

RECEIVED  
MAR 06 2026  
WESTPORT P. & Z. C.

**NOT APPLICABLE**

<b>FLOOR AREA and PARKING SPACES</b> <i>For This TENANT SPACE</i>	<b><i>REQUIRED</i></b>	<b><i>EXISTING</i></b>	<b><i>PROPOSED</i></b>	<b><i>COMMENTS</i></b>
181 Main Street, Westport, CT <b>Address</b> _____				
<b>Office</b> - Floor area (1:250)				
<b>Healthcare Professional</b> floor area (1:200)				
<b>Retail</b> - Floor area (1:180)				
<b>Medical</b> - Floor area (1:200)				
<b>Patron Bar</b> - Floor area (1:20)				
<b>Rest. Patron</b> - Floor area (1:50)				
<b>Non Patron</b> - Floor area (1:500)				
<b>Apartment</b> - # of bedrooms (varies)				
<b>Bank Office</b> - (1:250)				
<b>Bank Customer Area</b> - (1:220)				
<b>Other</b> - (Explain):				
<b>Size of Parking Spaces:</b> Standard (9' x 18):				
Small (8' x 16' min):				
Handicapped:				
<b>Loading Spaces:</b> Number and Size:				