

Zoning Department
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landgroveza@gmail.com

TOWN OF LANDGROVE, VERMONT
Application for a Zoning Permit
\$ See Fee Schedule
(Applicant is responsible for legal notice fees)

Town Offices
88 Landgrove Road
Landgrove, VT 05148
Hours: Thurs 9am-1pm

ZONING

Location of Property _____ (E-911 address)

Property ID # _____

Zoning District: Village Rural Residential

CARE Commercial

Overlay District(s) that apply to property:

Utley Flats Scenic

Special Flood Hazard Area

River Corridor

Landowner: Name _____ Email Address _____

Mailing Address _____ Phone Number _____

Applicant: Name _____ (If other than Landowner) Email Address _____

Mailing Address _____ Phone Number _____

Requesting Permit for:

Type: Permitted Use Permitted Use (with Site Plan Approval required)

For: (Check all that apply) New Construction Addition Removal/Demolition Change of Use

Subdivision Pond/ Pool/ Deck PUD Other _____

Present Use and Occupancy _____ Proposed Use and Occupancy _____

Lot Size _____ acres Frontage on Public Road/ Right of Way _____ ft

Project Description (all construction activity and site work associated with project) _____

Project Cost \$ _____ Work to be commenced on _____ (date), completed by _____ (date)

Dimensions of Proposed Structure or Addition: Length _____ ft Width _____ ft Height _____ ft # Stories _____

Set Back of Proposed Structure: From Center of Road/ Right of Way _____ ft Rear _____ ft Side _____ ft Side _____ ft

Type of Water System _____ Type of Septic System _____

A general plot plan must be provided (using the graph paper provided or as a separate document) and attached to each copy of the application. Plot plan must show the location, boundaries, dimensions and area of the property, existing and proposed structures, ponds and watercourses, wells and septic systems. Applicant is responsible for obtaining all other required permits, including but not limited to:

Local: Access (Road Commissioner) _____ Site Plan Approval (Planning Commission) _____

State: Wastewater _____ Act 250 _____ Dept of Labor and Industry _____ Dept of Health _____

Contact a Permit Specialist at 802-282-6488 or visit <http://dec.vermont.gov/environmental-assistance/permits/specialists> to determine if additional permits apply to your project.

Upon completion of the project, a Certificate of Occupancy/Use must be obtained from the Administrative Officer before use.

I swear under the pains and penalties of perjury that all information submitted with this application is correct to the best of my knowledge.

Applicant's Signature _____ **Date** _____ **Landowner's Signature** _____ **Date** _____

Return three copies of this application to: Administrative Officer, Town of Landgrove, 88 Landgrove Road, Landgrove, VT 05148

