

**TOWN OF SHELDON
APPLICATION FOR ZONING PERMIT**

APPLICANT: Name: _____ Phone: _____
Mailing Address: _____

PROPERTY INVOLVED: Location /Physical Address: _____

Applicant's Interest: Owner Lessee Option Holder Owner's Agent

Owner's Name (if different from applicant): _____

Mailing Address: _____

Date Property Acquired: _____ SPAN #: _____

Acreage: _____ Present Land Use: _____

Applicant E-mail: _____ Owner E-mail: _____

ADJACENT PROPERTIES: provide the names and addresses of all adjacent property owners, including those across the streets, roads, rights-of-way and water courses, application will not be accepted unless this is completed.

<u>Name</u>	<u>Mailing Address of Adjacent Property Land Owners</u>

PROJECT DESCRIPTION:

PROPOSED DEVELOPMENT: New Building(s) Addition Extension of Permit Demolition
(Mark all that apply) Change of Use Other (specify) _____

Vermont State Waste Water Permit # (if applicable): _____

	Label (house, barn, garage, shed)	Feet			Setback From Property Line (feet)				Water Source	Sewage System
		Length	Width	Height	Road/Row	Rear	Side	Side		
Existing Structures										
Proposed Structures										

ADDITIONAL INFORMATION REQUIRED: a sketch must be submitted with each copy of this application (recommend the sketch be on at least a 8.5in x 11in piece of paper). The sketch must show: property boundaries of the existing property lot(s), easements and rights-of-way, existing and proposed structures, proposed land alterations, public roads, principal dimensions, scale, and north point. (Recommend a birds-eye view of the project and with respective distances depicted on the sketch.)

*****Acknowledgement Certification*****

State and Federal regulations may apply, may be more or less restrictive than Sheldon's bylaws, and may affect this project; I acknowledge it is my responsibility to obtain all required state and federal permits; (Call the State's permit specialist at 802-477-2241 with any questions). Applicant's Initials _____

I hereby certify that the information in this application (including attachments) is true and correct and is an accurate representation of the respective project.

Signed: _____
(Applicant) (Date)

Signed: _____
(Legal Owner) (Date)

FOR ADMINISTRATIVE USE ONLY

- Fee Amount _____ Ck# _____
- Application
- Sketch of proposed project
- Supporting Documentation

Complete Application Received: _____

Decision:

Approved, subject to conditions specified below or on attached form.
Permit valid beginning on: _____ and ending on _____

Denied, for reasons specified below or on attached form. _____

Signed: _____
(Administrative Officer) (Date of Decision)

Permit Notice Posted

(ZA must post Notice in Town Clerk's within 3 days of approval of permit)

- Copy of permit to Town Listers _____ (within three days of issuance)
- Post in public place in Town Clerk's Office until notice expiration date _____
(15 days from date of issuance)