Date:	Application #:
Fees Paid:	+ \$10 recording fee =
Parcel ID #:	
Tax Map #:	

## **TOWN & VILLAGE OF WATERBURY ZONING PERMIT APPLICATION**

Please provide all of the information requested in this application.

Read the Zoning Regulations and familiarize yourself with the requirements. Failure to provide all the required information will delay the process of this application. Based upon the nature of the project you may need to submit additional information. For instructions on how to fill out this form please refer to the Zoning Permit Application Instructions & Fee Schedule available on the municipal website or at the municipal offices. Submit one copy of the completed application and a check payable to the Town of Waterbury according to the zoning fee schedule. For questions about the permit process please contact the Zoning Administrator at 244-1018

CONTACT INFORMATION									
APPLICANT		PROPERTY OWNER (if different from Applicant)							
Name:		Name:							
Mailing Address:		Mailing Address:							
Home Phone :		Home Phone :							
Work/Cell Phone:		Work/Cell Phone:							
Email:		Email:							
PROJECT DESCRIPTION			CHECK ALL THAT APPLY:						
Physical Location of project (E911 Add		<ul><li>NEW CONSTRUCTION</li><li>□ Single-Family Dwelling</li></ul>							
Lot size: Zoni	ng District:		□ Two-Family Dwelling						
Current Use:		☐ Multi-Family Dwelling							
Brief description of project:			<ul> <li>Commercial / Industrial Building</li> <li>Residential Building Addition</li> <li>Comm./ Industrial Building Addition</li> <li>Accessory Structure (garage, shed)</li> <li>Accessory Apartment</li> </ul>						
Water system:	_ Waste water system:		□ Porch / Deck / Fence / Pool / Ramp						
EXISITING	PROPOSED		<ul> <li>Development in SFHA (including repairs and renovation)</li> </ul>						
Square footage: Height:	Square footage:	Height:	0.1						
Number of bedrooms/baths:	USE □ Establish new use								
# of parking spaces:		es:	□ Change existing use						
Setbacks: front:									
sides:rear:	sides:	rear:							
Cost of Improvement (\$):			OTHER  Subdivision (# of Lots: )						
Estimated construction start date:	□ Subdivision (# of Lots:) □ Boundary Line Adjustment (BLA)								
ADDITIONAL MUNICIPAL	□ Planned Unit Development (PUD)								

- □ Curb Cut / Access permit □ E911 Address Request
- □ Water & Sewer Allocation □ none of the above

[Additional State Permits may also be required]

□ Soil/sand/gravel/mineral extraction

□ Parking Lot

□ Other

## SKETCH PLAN

Please include a sketch of your project, drawn to scale, with all required measurements - see *Zoning Permit Application Instructions*. You may use the space below or attach separate sheets. For plans larger than 11"x17" please provide a digital copy (pdf. file format) in addition to a paper copy.

**SIGNATURES** The undersigned hereby applies for a Zoning Permit for the use described in this application to be issued on the basis of the representations made herein all of which the applicant swears to be complete and true.

Applicant Signature	date
11	
Property Owner Signature	date

## CONTACT

Zoning Administrator Phone: (802) 244-1018

Mailing Address: Waterbury Municipal Offices, 51 South Main Street, Waterbury, VT 05676

Municipal Website: www.waterburyvt.com

OFFICE USE ONLY	
Zoning District/Overlay:	Subdivision:  □ Subdv. □BLA □PUD
Authorized signature:  Date:	□ Other □ n/a