TOWN OF WATERBURY ZONING PERMIT APPLICATION

Date:	Application #:
Fees Paid:	+ \$10 recording fee =
Parcel ID #:	
Тах Мар #:	

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 802-244-1018.

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	ress):	Single-Family Dwelling							
Lot size: Zoning Dist	trict:		Two-Family Dwelling Kerki Formile Develling						
Existing Use: P		 Multi-Family Dwelling Commercial / Industrial Building 							
Brief description of project:	-		 Residential Building Addition 						
bier description of project.			□ Comm./ Industrial Building Addition						
			 Accessory Structure (garage, shed) 						
			Accessory Apartment						
			\Box Porch / Deck / Fence / Pool / Ramp						
Cost of project: \$	Estimated start date:		 Development in SFHA (including repairs and renovation) 						
Water system:	Waste water system:		□ Other						
EXISITING	PROPOSED		USE						
Square footage: Height:	Square footage:	Height:	Establish new use						
Number of bedrooms/baths:	/bath:	□ Change existing use							
# of parking spaces:	# of parking spaces:		Expand existing use						
Setbacks: front:	Setbacks: front:		 Establish home occupation OTHER 						
sides:rear:	sides: /	rear:	-						
			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.

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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
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date

Property Owner Signature

CONTACT Zoning Administrator Phone: (802) 244-1018 Mailing Address: Waterbury Municipal Offices, 28 North Main Street, Suite 1, Waterbury, VT 05676 Municipal Website: www.waterburyvt.com

	OFFICE USE ONLY					
Zoning District/Overlay:	_ REVIEW/APPLICATIONS:					
Review type: □ Administrative □ DRB	□ Conditional Use □ Waiver					
DRB Referral Issued (effective 15-days	□ Site Plan □ Variance					
DRB Mtg Date:	Decision Date:					
Date Permit issued (effective 16-days I	□ Subdv. □ BLA □ PUD					
Final Plat due (for Subdivision only):	Overlay:					
Remarks & Conditions:		□ DDR □ SFHA □ RHS □ CMP □ Sign □ Other				
Authorized signature:	Date:	□ n/a				