

Permit # \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ (Owner ☐ ☐)

Mailing Address of Applicant/Owner \_\_\_\_\_

E911 Address \_\_\_\_\_

Zoning District: \_\_\_\_\_ Parcel/Tax Map #: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Applicant's: Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (M) \_\_\_\_\_

Applicant's Email address: \_\_\_\_\_

**Zoning Permit Request**

Current Use of Property: \_\_\_\_\_

Proposed Use of Property: \_\_\_\_\_

Application includes (Check all that apply): New Structure ☐ Addition ☐ Alteration ☐

Describe work to be done: \_\_\_\_\_

(A sketch plan of property and proposed work MUST be attached – see page 3)

Dimensions of proposed building: Length \_\_\_\_\_ ft Width \_\_\_\_\_ ft Height \_\_\_\_\_ ft

Cellar: Full ☐ Partial ☐ Foundation: Crawl Space ☐ Slab-on-grade ☐ Piers ☐ Other \_\_\_\_\_

Lot Size: \_\_\_\_\_ Acres Square footage of Proposed Structure \_\_\_\_\_

**Existing and Proposed Setbacks**

Distances of existing and proposed structures to:

Road/Right of way \_\_\_\_\_ ft Center of road \_\_\_\_\_ ft ROW \_\_\_\_\_ ft

Facing Structure from street, road or ROW: Left Prop. Line \_\_\_\_\_ ft Right Prop. Line \_\_\_\_\_ ft

Rear Prop. Line \_\_\_\_\_ ft Setback from river or stream (if applicable) \_\_\_\_\_ ft

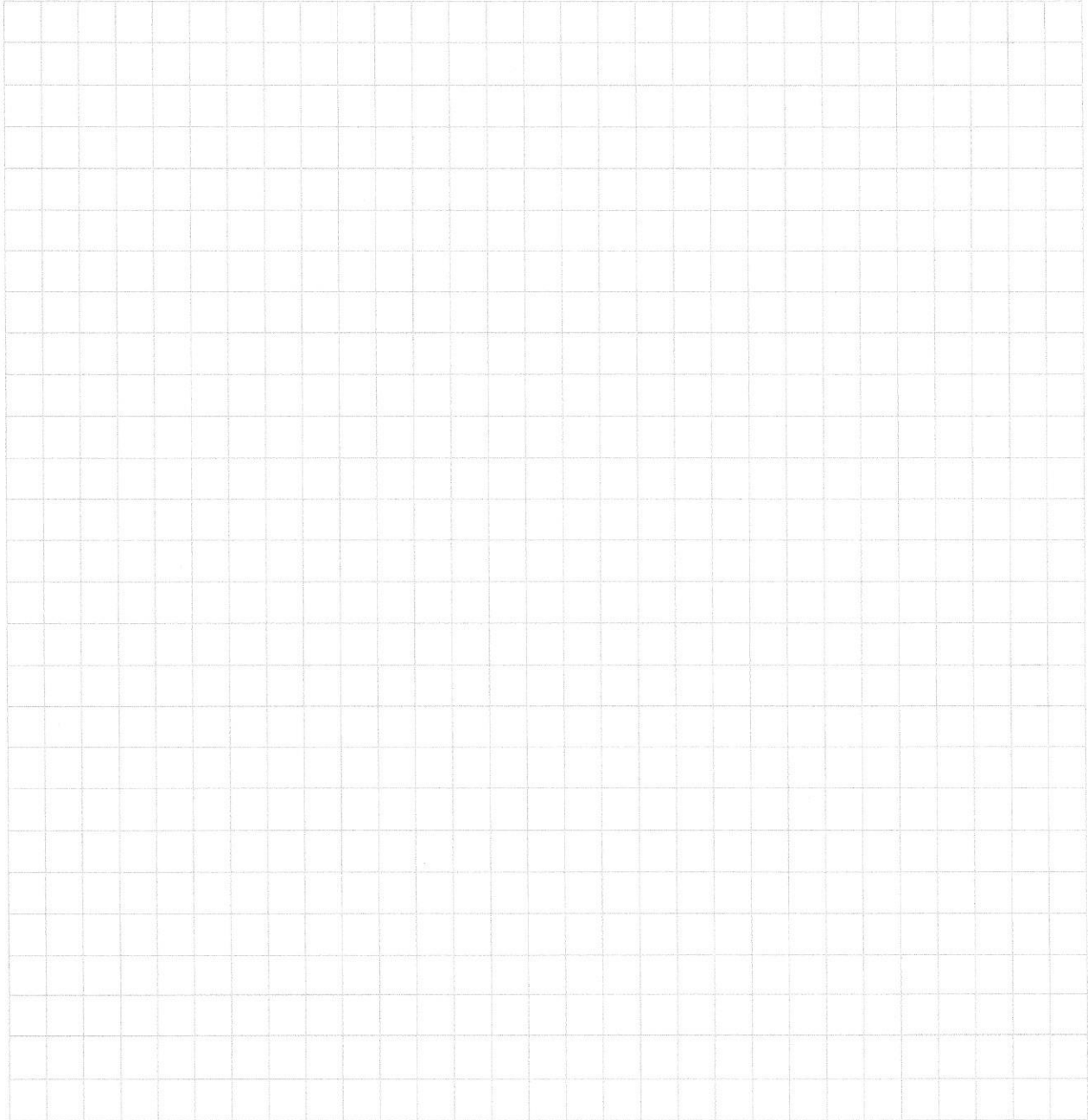
It is the responsibility of the applicant to obtain required State of Vermont permits for Potable Water Supply and Waste Water, where applicable. All construction must be in accordance with Town of Pawlet Zoning Bylaws and The VT Residential Building Energy Standards.

The undersigned hereby requests a zoning permit for the use stated above. Any misrepresentation by the applicant or applicant's failure to undertake action as approved by the Zoning Administrator within two years of approval will automatically void the permit. This application for a Zoning Permit shall not be valid until all information and required documentation is complete. Once approved by the Zoning Administrator this permit shall be valid for two calendar year from date of approval. All construction must be complete during the two year permit period. The undersigned understands that approval of any part of this permit does not constitute a warranty of any kind and shall waive all claims against the Town of Pawlet and its agents arising out of contract or tort.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Name of Applicant:** \_\_\_\_\_ **Permit #** \_\_\_\_\_

**Property Address:** \_\_\_\_\_



**SKETCH PLAN**

Scale: \_\_\_\_\_ inch = \_\_\_\_\_ feet      Block # \_\_\_\_\_      Lot # \_\_\_\_\_

**Abutting Landowners if required by Zoning Administrator**

Permit # \_\_\_\_\_

Contact Information: Contractor ☐ / Designer ☐ / Architect ☐ / Other \_\_\_\_\_

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**List of Property Abutters**

This information is available from the Town Assessors office and from the Town Tax Maps

Name: Address:  Parcel ID#: Map:      Block:      Lot:	Name: Address:  Parcel ID#: Map:      Block:      Lot:
Name: Address:  Parcel ID#: Map:      Block:      Lot:	Name: Address:  Parcel ID#: Map:      Block:      Lot:
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**Continue listing additional property abutters on the next page, if necessary.**

Permit # \_\_\_\_\_

Name: Address:  Parcel ID#: Map:        Block:        Lot:	Name: Address:  Parcel ID#: Map:        Block:        Lot:
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Sample  
Site Plan

# ZONING PERMIT APPLICATION

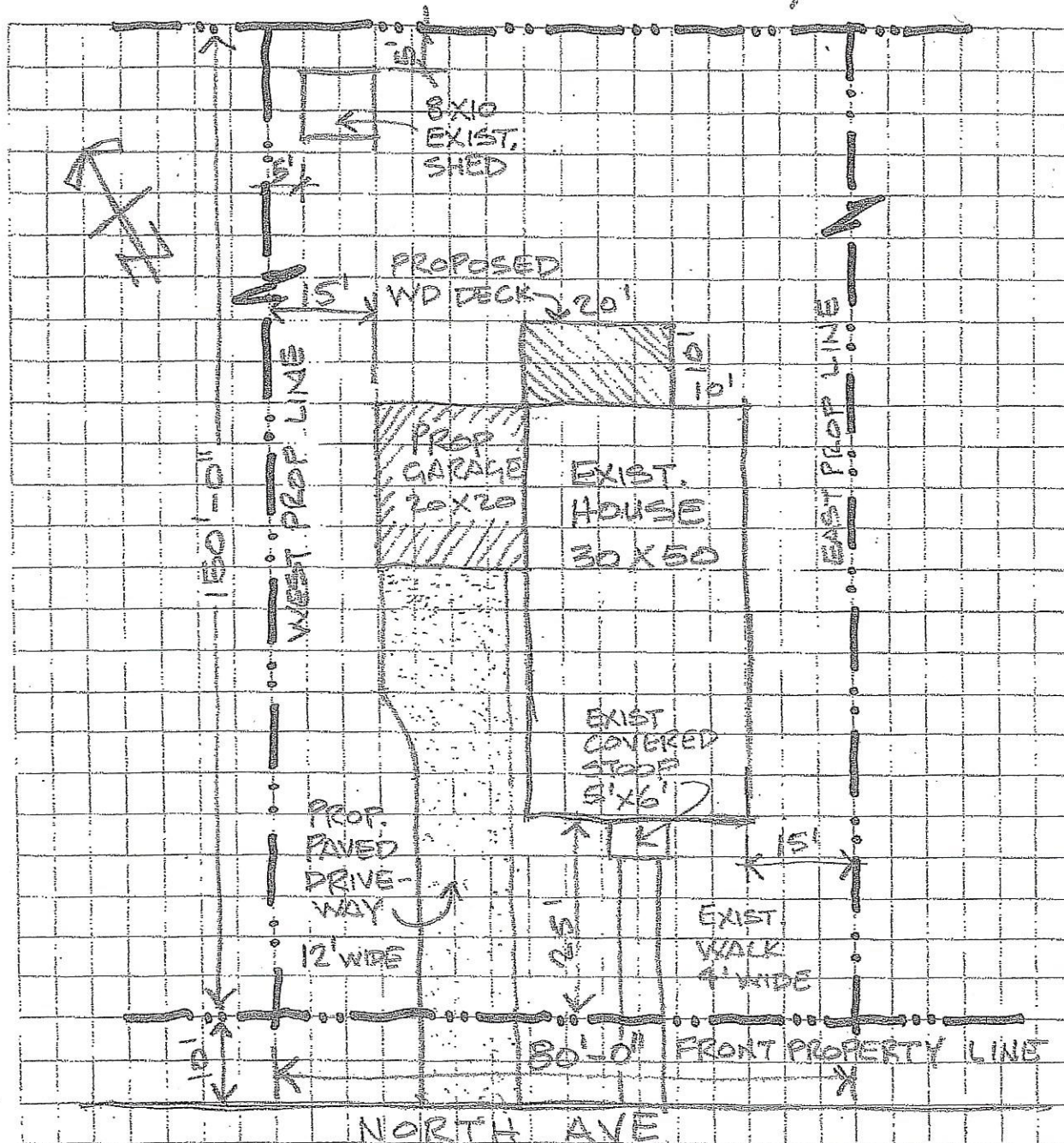
Name of Applicant: John & Jane Doe

Permit #

Signature: John Doe

Date: 1/1/20

Property Address: 2020 North Ave Newtown, ST 01230



SKETCH PLAN

Scale: 1 inch = 20 feet

Block # 402

Lot # 12

TOWN OF PAWLET • BOX 128 • PAWLET, VERMONT 05761 • Phone 802/325/3309 • Fax 802/325/6109