

# TOWN OF CABOT

## Application for Zoning Permit

*All Information is required for application approval*

Applicant Name	Parcel ID#
Applicant Mailing Address	Landowner Name
Applicant Phone Number and/or Email	Landowner Mailing Address
Physical Location of Property ( <i>E-911 Address</i> )	Landowner Phone Number and/or Email

### NEW CONSTRUCTION INFORMATION

**A general plot plan showing the location of the property and buildings or work area must be attached to the application.**

Length & Width ( <i>Ex 10' x20'</i> )	Height - Number of Stories	Setback from:    Right of Way / Front    Rear    Side    Side <i>(in feet)</i>		
Well/Water system	Septic ( <i>WW permit # or installation date</i> )	Lot Size (acres)	Frontage on Public Road <i>(in feet)</i>	

Type of Construction (*Include a brief description - Ex.: New one family residence, detached garage, attached porch or deck, dormer*)

The undersigned hereby requests a Zoning Permit for the following use to be issued on the basis of the representations contained herein. The Permit is void in the event of misrepresentation or failure to undertake construction within one year of the date of approval. The Landowner or an interested person may appeal this decision of the Administrative Officer by submitting the appeal in writing to the Town Clerk's office within fifteen (15) days of the date of the decision. ***This permit shall not take effect and building may not commence until the time for such appeal has passed.***

This application must be signed by the Landowner and submitted with a fee of \$17.00

**The applicant or permittee retains the obligation to identify and apply for and obtain all other required permits and relevant state permits for this project. Call (802) 476-0195 to speak to the regional permit specialist**

	Date	Signature of Landowner
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### FOR USE BY ADMINISTRATIVE OFFICE ONLY

Fee Paid \$	Date Received	Referred to the Planning Commission and/or Zoning Board of Adjustment <input type="checkbox"/> Date
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Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	Reason for Denial
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Signed by Zoning Administrator	Date	Application No.
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**Project sketch, please indicate distances to property lines, building dimensions and location of utilities, driveway access, water, septic and other structures and features on the site.**

