

APPLICATION #: _____
(Assigned by the Town Clerk)

Received:

TOWN OF STRAFFORD, VERMONT
Application for Major Subdivision

Name of Landowner (Print)

Telephone # or Cell #

Mailing Address

Physical Address

Parcel ID#

Email

Authorized agent to be contacted (If different from above)

Telephone # or Cell #

Email

Location of Parcel: _____ Book _____ Page _____
(Please attach a copy of your deed).

Total acreage of land: _____ Proposed # of lots after subdivision: _____

Has a Site Plan Review been Completed and Approved? Yes ___ No ___ Date: _____

Lot Number, Acreage for Each Proposed Lot (after Subdivision) and Proposed use for each lot:
Use back side of paper if more than 5 lots.

Lot 1: _____

Lot 2: _____

Lot 3: _____

Lot 4: _____

Lot 5: _____

Covenants, easements, and/or deed restrictions in effect: _____

ABUTTERS: (Including those across a public right-of-way) ***Attach Additional Sheets if necessary***
 Name and mailing address of ALL abutters. Please print clearly and confirm all addresses are correct by reviewing Listers Cards that are accessible via the Town of Strafford’s website
<https://www.straffordvt.org/town-clerk>

1.
 Name Address City, State, Zip

2.
 Name Address City, State, Zip

3.
 Name Address City, State, Zip

4.
 Name Address City, State, Zip

5.
 Name Address City, State, Zip

6.
 Name Address City, State, Zip

7.
 Name Address City, State, Zip

8.
 Name Address City, State, Zip

9.
 Name Address City, State, Zip

10.
 Name Address City, State, Zip

***The preliminary plan must be included with this application:** Please refer to section 7 Subdivision Review in the Strafford VT Unified Bylaw adopted November 16, 2023 for more information and guidelines. Should there be a 3rd meeting on a warned application an additional fee of \$150.00 must be paid before the 3rd meeting date.

****PLEASE NOTE:** State permits may be required for this project. It is the obligation of the applicant to identify and obtain necessary state permits. All permits for wastewater and potable water are State issued. To obtain information regarding permits for wastewater and potable water, contact the Agency of Natural Resources, Wastewater Management Division, at (802)476-0190. To contact the regional State Permit Specialist for the Strafford area to determine what other state permits may be required, contact the Agency of Natural Resources Permit Specialist at (802)476-0195.

*****Applicant has 180 days from approval to record a Mylar and new Deed with the town.**

I represent that all of the information provided with this application is true, correct and complete to the best of my knowledge and belief. I have a copy of the Strafford VT Unified Bylaw dated November 16, 2023 and have read the applicable sections.

Landowner / Applicant's Signature

Date

This Subdivision is ____ is not ____ approved by the Strafford Development Review Board (DRB).

With the following conditions: _____

Denied/Reason: _____

Signature: _____

Date: _____

Chair, Strafford Development Review Board

Preliminary Plan Hearing: Fee \$150.00
Major Subdivision: Fee \$500 (\$100 for each additional lot over 3 lots)

FOR OFFICE USE ONLY: Fee \$ _____ Ck# _____ Received By: _____ Date: _____

Additional Fee's: _____ Reason: _____

Received by: _____ Date: _____