APPLICATION #:(Assigned by the Town Clerk)	Received		
	TOWN OF STRAFFORD VERMONT		

TOWN OF STRAFFORD, VERMONT Zoning Permit Application

The undersigned hereby applies for a Zoning Permit for the project and use described below. A permit is issued on the basis of the representations contained herein. The permit shall become null and void in the event of misrepresentation and/or not being in compliance with the State and Town laws and regulations, or failure to complete construction or initiate a use, within two (2) years of the date of approval. In the event of noncompliance, I understand that this permit may be suspended until proper approval(s) is/are granted.

granted.						
Name of Landowner (Print)		Telephone # or Cell #				
Mailing Address	(PO Box, City, State	and Zip Code)				
Physical Address			Parcel ID#			
Email						
Name of Applicant - if different tha		Telephone # or Cell #				
Email						
Please complete the following period: 1. Project Location: 911/House #			- '			
1. Project Location: 911/House # Street: Parcel No: Zone: Drive Is property located in a flood hazard area? Yes No						
Are there any easements/restrictions on the property?						
Warranty Deed Reference: Boo	ok Page	Date	Please attach a copy.			
*Is there a current septic syste	em on the lot?	*Is there a	source of water on the lot?			
Has an application for a State of VT Waste Water Permit been filed? Permit #						
Date Issued	_					
Description of proposed struct	Description of proposed structure(s) and use:					

3.	Dimensions of pro	posed building, a	ddition or othe	r structure: _				
	# of stories to be b	ouilt:# (of Bedrooms: _	В	uilding height above	grade:		
	How many Sq Ft. v	vill be finished spa	ace:					
	*Setback from pro	perty lines: Side	e	Side	Rear			
	*Setback from cer	nterline of travele	d way	*	·Highway frontage _			
4.	. Please supply a drawing on 8 $\frac{1}{2}$ x 11" paper showing property lines and dimensions in feet for items stared (*) and requested above. Please show location of all driveways, all existing buildings and proposed buildings, and all surface water (streams, rivers, ponds and wetlands) on parcel, current and proposed well, & waste water system. On a separate piece of paper include a drawing of the footprint of the proposed new construction. Best guess on completion date:							
5.	5. The drawings, data and statements, which I have included in this application, are true and correct to the best of my knowledge. The signatory, if other than the landowner, must submit a written stateme from the landowner authorizing the Signatory to submit this application. By signing below, you also understand that upon completion you agree to notify and grant the Zoning Administrator permission t enter the premises to issue a Certificate of Compliance that will be recorded. There is a \$35.00 certificate fee, plus \$15.00 recording fee due to the town at the time of inspection.							
	(Circle one) Lando	wner or Author	rized Agent		Date			
	Witness				Date			
			HEARING IN	FORMATION				
Не	aring Not Required	Hearing w			onditional Use	Subdivision		
					onational osc			
Со	mments:							
	Approved. This	s approval shall n	ot become effe	ective until: _				
		Refer to 1	own Applicatio	n Fees for re	quired fee.			
	te of Administrative	e Adr	ninistrative Off	icer's Signatı	ure			
Fili	ing Fee	Rec'd By			Date:	Revised 02/2024		
						Revisea 02/2024		