

# TOWN OF BARNET, VT.

## ZONING PERMIT APPLICATION FORM

APPLICATION NO. \_\_\_\_\_

Please type or print plainly (black ink is best), answer ALL questions, and consult the two-page instructions sheet. NO STAPLES. Incomplete or illegible applications will be returned & processing delayed.

NAME OF APPLICANT(S)/LANDOWNER(S) AS ON DEED \_\_\_\_\_  
PHONE #(\_\_\_\_) \_\_\_\_-\_\_\_\_; MAILING ADDRESS \_\_\_\_\_

NAME OF LANDOWNER(S) IF DIFFERENT FROM ABOVE \_\_\_\_\_  
PHONE#(\_\_\_\_) \_\_\_\_-\_\_\_\_; MAILING ADDRESS \_\_\_\_\_

LOCATION & DESCRIPTION OF PROPERTY: PARCEL ID #/TAX MAP # \_\_\_\_-\_\_\_\_-\_\_\_\_:  
TH#\_\_\_\_, SA#\_\_\_\_, NAME&#\_\_\_\_\_ FRONTAGE\_\_\_\_\_ FEET  
PVT ROAD NAME &#\_\_\_\_\_ FRONTAGE\_\_\_\_\_ FEET  
US ROUTE 5 SOUTH #\_\_\_\_\_ OR US ROUTE 5 NORTH #\_\_\_\_\_ FRONTAGE\_\_\_\_\_ FEET  
SIZE OF LOT \_\_\_\_\_ACRES+/- PRESENT USE\_\_\_\_\_ NEW USE\_\_\_\_\_  
SHORELINE FRONTAGE \_\_\_\_\_FEET DISTRICT: AG ( ) LD ( ) RR ( ) VILL ( )  
NAME OF ADJOINING PROPERTY OWNERS (USE NAMES AS ON DEED ) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PROPOSED CONSTRUCTION: TYPE & # \_\_\_\_\_  
SIZE OF EACH \_\_\_\_\_ HEIGHT \_\_\_\_\_ FEET  
SETBACKS OF STRUCTURES FROM PROPERTY LINES: SIDELOT LINES\_\_\_\_\_/\_\_\_\_\_ FEET  
REAR\_\_\_\_\_ FEET; CENTER LINE PUBLIC ROAD \_\_\_\_\_ FEET OR PRIVATE ROAD \_\_\_\_\_ FEET  
EDGE OF ANY RIGHTS OF WAY \_\_\_\_\_ FEET; UTILITY LINES \_\_\_\_\_ FEET; SHORELINE \_\_\_\_\_ FEET

**SKETCH WHICH SHALL INCLUDE:** A bird's-eye-view of the shape and size of the lot; the shape, size, and location of ALL structures already on the lot in relationship to all property and right-of-way lines, including electric and/or phone lines. Include location of water supply and sewage systems. Include any structure to be erected, moved or altered. Does not need to be to scale, but please include all the information as requested. ONLY SKETCH AS REQUESTED IN THIS SPACE. DO NOT USE PENCIL.

**SUBDIVISION: NUMBER OF LOTS \_\_\_\_\_ SIZE OF EACH LOT \_\_\_\_\_ ACRES +/- STATE PERMIT IS REQUIRED FOR SUBDIVISION & SEWAGE APPROVAL; PLEASE CALL SUE CROSS AT (802) 751-0130. STATE PERMIT # \_\_\_\_\_. MUST ALSO COMPLY WITH VT ENERGY CODE; PLEASE CALL ENERGY CODE ASSISTANCE CENTER TOLL-FREE AT (855) 887-0673.**

**APPLICANT CERTIFICATION:**

The undersigned applicant(s) affirms that the information presented on this application is true, accurate and complete. Any permit issued shall be null and void if any information provided is inaccurate or misrepresented.

APPLICANT(S) SIGNATURE \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_\_

**LANDOWNER(S) CERTIFICATION:**

The undersigned property owner(s) hereby consent to submission of this application and understand that if the application is approved the Zoning Permit and any attached conditions will be binding on the property. State of Vermont permits may also be needed.

LANDOWNER(S) SIGNATURE(S) AS ON DEED \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_\_

The Administrative Officer has 30 days to act on a permit application. An Interested Person as outlined in VSA Title 24, Chapter 117, Section 4465 (a), can appeal any act or decision by the Administrative Officer by filing a notice of appeal with the Secretary of the Board of Adjustment within 15 days of the date of such decision or act. Appeals should be addressed to: **Dawn Holtz 1745 Barnet Center Road Barnet, Vermont 05821**. An interested person may appeal a decision of the Board of Adjustment to Environmental Court within 30 days of the decision in accordance with VSA Title 24, Chapter 117, Section 4471.

**ZONING PERMIT FEES:**

PERMITTED USES \$25.00 & \$15.00 RECORDING FEE  
LATE FILING FEE 2X OR \$50.00 & \$15.00 RECORDING FEE  
APPLICATIONS REFERRED TO BOARD \$50.00 & \$15.00 RECORDING FEE  
LATE FILING FEE 2X OR \$100.00 & \$15.00 RECORDING FEE

FEES MUST BE INCLUDED WITH APPLICATION: CHECKS PAYABLE TO “ TOWN OF BARNET “ AND SUBMITTED TO THE ADMINISTRATIVE OFFICER, SHIRLEY WARDEN @ 521 WARDEN ROAD BARNET, VERMONT 05821 PHONE: 802 633 4993

\* LEAVING COMPLETED APPLICATION AT TOWN OFFICE WILL DELAY THE PROCESSING TIME

**DO NOT WRITE BELOW THIS LINE (form date 5/2022)**

**FOR TOWN USE ONLY**

Original to Town Clerk; Copies to Applicant, Board of Listers, Adjoining Landowners & 1 posted at Town Clerk’s Office.

RECEIVED \_\_\_\_/\_\_\_\_/\_\_\_\_\_. FEE \$ \_\_\_\_\_ CASH \_\_\_\_\_ CHECK NO. \_\_\_\_\_ ACTED ON \_\_\_\_/\_\_\_\_/\_\_\_\_\_.

DENIED & REFERRED TO THE BOARD FOR:

<input type="checkbox"/> CONDITIONAL USE	APPROVED <input type="checkbox"/> OR DENIED <input type="checkbox"/>	DATE ____/____/_____
<input type="checkbox"/> BACK LOT/CLASS 4 ROAD	APPROVED <input type="checkbox"/> OR DENIED <input type="checkbox"/>	DATE ____/____/_____
<input type="checkbox"/> VARIANCE/WAIVER	APPROVED <input type="checkbox"/> OR DENIED <input type="checkbox"/>	DATE ____/____/_____
<input type="checkbox"/> SITE PLAN REVIEW	APPROVED <input type="checkbox"/> OR DENIED <input type="checkbox"/>	DATE ____/____/_____
<input type="checkbox"/> PLANNED UNIT DEVELOPMENT	APPROVED <input type="checkbox"/> OR DENIED <input type="checkbox"/>	DATE ____/____/_____

SIGNED, CHAIRMAN, PLANNING/ZONING BOARD \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_\_

PERMIT APPROVED  OR DENIED  PERMIT EFFECTIVE \_\_\_\_/\_\_\_\_/\_\_\_\_\_. PERMIT EXPIRES \_\_\_\_/\_\_\_\_/\_\_\_\_\_

SIGNED, ZONING ADMINISTRATIVE OFFICER \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_\_

COMMENTS: