

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:
Susan Sinclair, PO Box 4026, St. Johnsbury, Vermont 05819-4026. 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:*	Basic	Recording Fee	Total
PERMITTED USES	\$25.00	\$15.00	\$40.00
LATE FILING FEE 2X OR	\$50.00	\$15.00	\$65.00
APPLICATIONS REFERRED TO BOARD	\$50.00	\$15.00	\$65.00
LATE FILING FEE 2X OR	\$100.00	\$15.00	\$115.00

*Denied applications incur the same fees as approved applications; each above fee applies for both approved and denied
applications.

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 1/2024) 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/SHORELINE	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: