

TOWN OF MONKTON

Zoning Permit Application

Office Use Only

Permit #: _____ Parcel #: _____ Zoning District _____
Date Received: _____ Fee Paid: _____

The undersigned hereby applies for a Zoning Permit for the following use, to be issued on the basis of the representations contained herein, of which the applicant swears to be true.

Type of permit requested: ☐ Building ☐ Subdivision ☐ Sign
☐ Conditional Use ☐ Temporary Use ☐ Other _____

Applicant Name: _____ Landowner Name: _____

Address: _____ Phone #: _____

E-mail Address: _____

Location of Property: _____

Description of Proposal: _____

Dimensions: Lot size: _____ acres Frontage on street: _____

Building width: _____ Building length: _____

Building height: _____ Square Footage: _____

Setback from street: _____ Rear yard setback: _____

Side yard setbacks: _____ & _____

The applicant (or owner) should submit as attachments to this application a dimensioned site plan or sketch (which need not be to scale) showing the location of the proposed structure with respect to the property boundaries, or the proposed alterations to the boundaries of the property in the case of a subdivision.

If the proposed project requires the installation of a new or substantially replaced wastewater/sewage disposal system, the applicant should also submit a copy of a soils test report for the property and a septic system design prepared by a certified Site Technician B or a professional Sanitary or Civil Engineer currently registered and licensed to practice in the State of Vermont.

Signature of Applicant: _____ Date: _____

Signature of Landowner: _____ Date: _____

All permit application fees must be paid and above information received before any action on your application may be taken. Permit application fees are non-refundable.

Zoning permit to take effect 15 days from date of issuance. Once a zoning permit has taken effect, applicants shall have two years from the date it becomes effective to substantially complete the activities subject to the permit and to secure a certificate of compliance documenting the projects substantial completion. If the applicant fails to substantially complete the activity authorized within the two-year period, the Zoning Permit shall become null and void. The applicant will need to reapply to complete any activities.

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Permit Decision

Any activity for which a zoning permit is required and which involves the construction or modification of a driveway intersection with a public right of way shall require, as part of the zoning permit, approval of such construction or modification.

Access Permit Granted: YES ☐ NO ☐ NOT REQUIRED ☐ Permit # _____

If State permit(s) are required, copies must be submitted to the Town.

State Permit(s) Granted: YES ☐ NO ☐ NOT REQUIRED ☐ Permit # _____

Upon the basis of the representations contained above this application is:

(A) Found to meet the official zoning ordinances of the Town of Monkton and is hereby **APPROVED**.

Zoning Administrator

Date

(B) Found **NOT** to meet the official zoning ordinance of the Town of Monkton and is hereby **NOTAPPROVED** for the following reason(s):

Zoning Administrator

Date

(C) Forwarded to the below Appropriate Municipal Body:

☐ Development Review Board

For the following reason(s):

Zoning Administrator

Date

An interested person may appeal any decision by the Administrative Officer within 15 days of the date of such decision.

It shall be unlawful to use or occupy, or permit the occupancy of any land or structure or part thereof until the Zoning Administrator issues a Certificate of Occupancy stating that the proposed use of the structure or land complies with the requirements of these Regulations.