



# APPLICATION FOR ZONING PERMIT

Fee Paid\$ \_\_\_\_\_ accepted by \_\_\_\_\_ Date \_\_\_\_\_

The undersigned hereby applies for permission to make certain improvements as described below. All construction to be completed in accordance with the Zoning Bylaws of the Town of Highgate and pertinent statutes of the State of Vermont.

Application #: \_\_\_\_\_ Applicant: \_\_\_\_\_

911 Address: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Lot Size in Acres: \_\_\_\_\_ (or sq.ft.) Tax parcel # (From Grand list) \_\_\_\_\_

Project Description:

Current Primary Use of Property: Primary Residence; Seasonal Dwelling; Rental Property; Commercial or Mixed Use **(circle one)**.

Is there a Secondary Use of the Property?: Yes \_\_\_\_\_ No \_\_\_\_\_ **If yes, circle type of use below**

Home occupation; home business; accessory dwelling; rental property, other \_\_\_\_\_.

Are there currently any Conditional Use, Mixed Use, Site Plan or ACT 250 Permits on this property?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please list all \_\_\_\_\_

Proposed Structure : \_\_\_\_\_

Replacement of existing? \_\_\_\_\_

Proposed Use: \_\_\_\_\_

Structure Width \_\_\_\_\_ Length \_\_\_\_\_ Height \_\_\_\_\_

Is this project a new Residential Dwelling? Yes \_\_\_\_\_ No \_\_\_\_\_  
if yes, number of bedrooms \_\_\_\_\_

If yes, you are responsible for meeting state energy codes. They are available at this link  
[http://publicservice.vermont.gov/topics/energy\\_efficiency/rbes- residential](http://publicservice.vermont.gov/topics/energy_efficiency/rbes- residential)  
[http://publicservice.vermont.gov/topics/energy\\_efficiency/cbes - commercial](http://publicservice.vermont.gov/topics/energy_efficiency/cbes - commercial)

Will this use require wastewater or drinking water? Yes \_\_\_\_\_ No \_\_\_\_\_

Will this project add a bedroom to an existing structure? Yes \_\_\_\_\_ No \_\_\_\_\_

IF THE ANSWER IS YES TO EITHER OF THE PREVIOUS QUESTIONS, YOU MUST RECEIVE A PERMIT FROM ANR WASTEWATER AND POTABLE WATER DIVISION PRIOR TO RECEIVING A HIGHGATE BUILDING PERMIT. It is the Applicant's responsibility to contact Jeff McMahon, ANR Permit Specialist, to determine if any additional permits are required for your project at 802-477-2241 or [jeff.mcmahon@state.vt.us](mailto:jeff.mcmahon@state.vt.us)

State wastewater permit # \_\_\_\_\_ attach a copy of the WW permit or exemption to this application.

**Is this proposal compliant with district setbacks? Yes \_\_\_\_\_ No \_\_\_\_\_**

(Refer to zoning district setback standards below for specifics)

District	Primary structures less than 200sq'		Front(center line of road)
	side and rear	side and rear	
Ag.	30'	10'	65'
Medium Density	30'	10'	65'
High Density	10'	5'	40'
Ind. Comm.	30'	30'	45' & 85' if on State Highway
Forest Res.	30'	10'	65'
Protected Area	30'	10'	65'
Shoreline	10'	5'	40'
Flood Plain	<u>See Flood Plain Regulations</u>		

**If not compliant, is this a replacement of a pre-existing structure? Yes \_\_\_\_\_ No \_\_\_\_\_**

**IF YOU ARE UNABLE TO COMPLY WITH DISTRICT SETBACKS FOR A NEW STRUCTURE or FOR MODIFICATIONS TO AN EXSITING STRUCTURE, YOU MUST RECEIVE A CONDITIONAL USE WAIVER OF SETBACK FROM THE DEVELOPMENT REVIEW BOARD PRIOR TO RECEIVING A PERMIT.**

**PERMIT VALID TWENTY FOUR (24) MONTHS FROM DATE OF ISSUANCE. SUBSTANTIAL CONSTRUCTION/PROGRESS MUST TAKE PLACE WITHIN THIS TIME PERIOD.**

SKETCH PROPOSED STRUCTURE (SEE EXAMPLE ON ATTACHED SHEET)

Sketch: Lot & Building improvements; front, side & rear yard setback from boundaries (front setback is measured from the centerline of the road). Mark N at compass point indicating north. Please show all structures on the parcel. Differentiate between existing and proposed structures.

***The undersigned applicant certifies that the information above is correct.***

\_\_\_\_\_

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Mailing address including town & zip code

\_\_\_\_\_  
Signature of landowner  
(if different from Applicant)

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Mailing address including town & zip code

**By statute, permit becomes valid 15 days after date of issuance, unless appealed.**

Application: Approved \_\_\_\_\_ Notes: \_\_\_\_\_

Further Review needed \_\_\_\_\_ Permit becomes Valid \_\_\_\_\_

Date of Issuance: \_\_\_\_\_

\_\_\_\_\_  
Zoning Administrator Signature

An appeal of the Zoning Administrative Officer's decision must be filed by an interested person with the DRB within 15 days of the decision and a copy of the notice of appeal shall be filed with the Zoning Administrator.

For office use only.

Received & Recorded

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Book:: \_\_\_\_\_ Page: \_\_\_\_\_

Land Records

\_\_\_\_\_  
Town Clerk

\_\_\_\_\_  
Highgate, VT

# SAMPLE LOT DIAGRAM

