

Town of St. Johnsbury, VT - Application for Zoning, Land Use, Subdivision, Site Development, or Demolition

Zoning ID#: 2023-_____ **Parcel ID #:** _____

Property/E-911 address: _____ **St. Johnsbury, VT 05819**

Property owner's name: _____

Mailing address if different than E-911 address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone and name of person to contact: _____

Email address of person to contact: _____

Proposed use or development: _____

Commercial ____ **Residential** ____ **New Construction** ____ **Renovation** ____ **Demolition** ____

Change of use ____ **Sign** ____ **Fence** ____ **Home Occupation** ____ **Other** ____

1) Changes in municipal potable or waste water demands need Department of Public Works approval for allocation; and connections to storm water drains and/or connections need Department of Public Works approval for allocation (802-748-4408) before a permit is issued.

2) Construction may require one or more permits from the state. To determine which state permits are required for your project go to

<https://vermont.force.com/permitnavigator/s/> the permit navigator results must be included with this application before a permit is issued.

3) Proof of application with the Department of Public Safety (802-479-4434) should be included with this application.

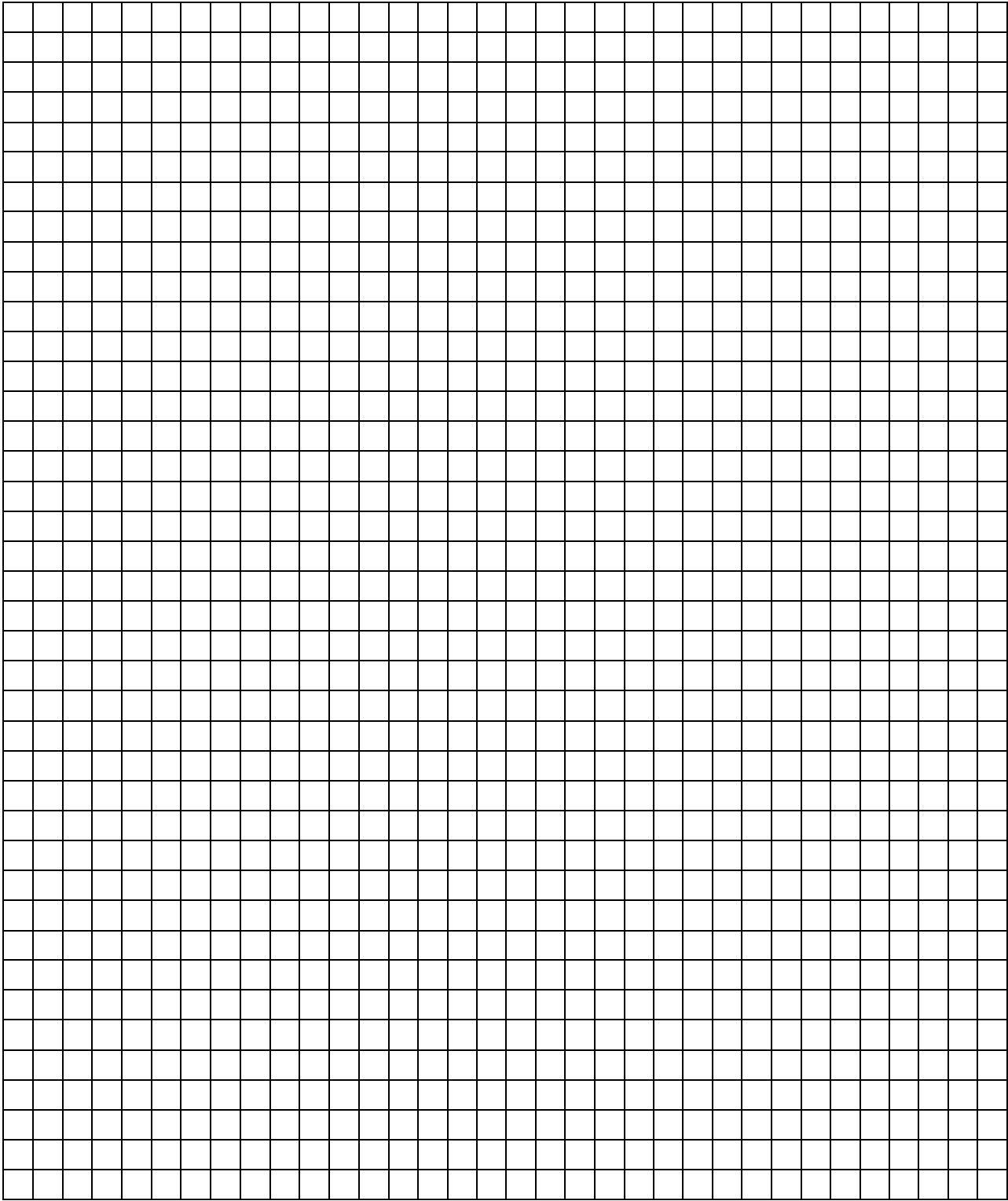
4) Driveways, curb cuts, and streets entering onto a state or town road or highway require review from the Agency of Transportation as well as the Department of Public Works (802-748-4408) before a permit is issued.

5) If the parcel is in a Special Flood Hazard Area you will be required to submit additional paper work; the application will first be forwarded to the Agency of Natural Resources for a 30-day comment period; and followed by final review/approval by the Development Review Board.

Owner's Signature: _____ **Date:** _____

Authorized Agent Signature: _____ **Date:** _____

1) Draw a bird’s eye view of all proposed activities/structures at the location. 2) Show the length, width and height of all structures. 3) Show the distances of the activities/structures from the front, both sides and rear property lines.



Property location information:

Zoning district: R-A R-B R-T RL-1 RL-2 M-U HS Comm Ind CD

Design control district – Yes/No

Town Water – Yes/No

Town Sewer – Yes/No

Change of use: Yes/No

Explain existing use:

Explain proposed use:

ZONING OFFICE USE ONLY

Date Application Completed _____

Design control district-____Site review-____Conditional use permit-____ Variance- ____ Appeal- ____

Referred to Design Advisory Committee yes/no Date:_____ Returned date: _____

Referred to Development Review Board yes/no Hearing Date:

Submitted to Agency of Natural Resources yes/no Date: _____ Approved: yes/no
Submitted to Secretary of Transportation yes/no Date: _____ Approved: yes/no

Permit Approved: _____ With conditions: Yes ____ No ____ Denied: _____
By Development Review Board

THIS APPLICATION IS:

Granted/Permit No: _____ Denied: ____ Exempt: ____

By: _____ Date: _____
H. Paul Berlejung, Zoning Administrator

Reasons for denial/conditions: _____

Zoning Administration

Permit Fee Schedule and Payment Record

Zoning Fee Structure

Zoning application – all applications **\$55**

Development Review Board Hearing **- all requests for board hearing** **\$55**

- Minor Subdivision \$0 per lot 0
- Major Subdivision \$20 per lot > 4 \$20 X
Other

Design Advisory Committee Review **0**

Certificate of zoning compliance recording fee \$15

Payment Record

Zoning ID: 2023-XXX

Last Name:

Zoning Permit Fees Due

Application Fee **\$55.00** Received _____

DRB Hearing Fee **\$55.00** Received _____

Subdivision Fee # Lots \$20.00 per lot Received _____

Cert. of Comp. recording fee \$15.00 Received _____

Mylar recording fee \$25.00 Received: _____

Total Due: **\$** **Total Received: \$**