

**For Office Use Only**

Application # \_\_\_\_\_

**Requires further review:**

Date Received \_\_\_\_\_

Requires Planning Commission Review \_\_\_\_\_

Fee Paid \_\_\_\_\_

Requires ZBA Approval \_\_\_\_\_

Zoning District \_\_\_\_\_

Date of above review(s) \_\_\_\_\_

Parcel Tax Map ID# \_\_\_\_\_

Result of above review(s) \_\_\_\_\_

Flood Zone \_\_\_ River Corridor \_\_\_ Wetlands \_\_\_

\_\_\_\_\_

**Approved** if signed by appropriate Authority:

\_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_

Permit Valid \_\_\_\_/\_\_\_\_/\_\_\_\_ Permit Expires \_\_\_\_/\_\_\_\_/\_\_\_\_

*Approved by Planning Commission 07/13/17*

**TOWN OF WHITINGHAM, VERMONT  
PO Box 529, Jacksonville, VT 05342  
(802) 368-7500**

**APPLICATION FOR ZONING PERMIT**

Location of Property (Street 911#) \_\_\_\_\_

Name of Landowner \_\_\_\_\_ email address \_\_\_\_\_

Mailing Address \_\_\_\_\_ zip code \_\_\_\_\_

Telephone Numbers – DAY \_\_\_\_\_ EVENING \_\_\_\_\_

Name of Applicant/Representative \_\_\_\_\_ email address \_\_\_\_\_

Telephone Numbers of Applicant/Representative - DAY \_\_\_\_\_

**APPLICATION IS MADE TO:**

- Build  Alter  Repair  Extend  Remove/Demolish  Change of Use  New Sign
- Single-Family Dwelling  Multi-Family Dwelling  Commercial/Business  Industrial
- Accessory Structure  Right-of-Way  Home Occupation  Home Industry  Other

>>Any dwelling or additional living space greater than 500 square feet requires state energy code certification – **REQUEST HANDBOOK**

**Description of Proposed Use and/or Structure:** \_\_\_\_\_

**Parcel Description:**

**Parcel Size/Acreage:** \_\_\_\_\_ **Parcel Road Frontage:** \_\_\_\_\_

**EXISTING SETBACKS:**

**Front** (from centerline of road) \_\_\_\_\_

**Right Side:** \_\_\_\_\_

**Left Side:** \_\_\_\_\_

**Rear:** \_\_\_\_\_

**Height of Structure:** \_\_\_\_\_

**PROPOSED SETBACKS:**

**Front** (from centerline of road) \_\_\_\_\_

**Right Side:** \_\_\_\_\_

**Left Side:** \_\_\_\_\_

**Rear:** \_\_\_\_\_

**Height of Structure:** \_\_\_\_\_

**Dimensions of all Existing Buildings**

(i.e. 38'x26'=988 sq.ft.)

**Home:** \_\_\_\_\_

**Garage:** \_\_\_\_\_

**Accessory Bldg:** \_\_\_\_\_

**Other:** \_\_\_\_\_

**Dimensions of PROPOSED Buildings**

**Home:** \_\_\_\_\_

**Garage:** \_\_\_\_\_

**Accessory Bldg:** \_\_\_\_\_

**Other:** \_\_\_\_\_

**NEW SQUARE FOOTAGE ON THIS APPLICATION** \_\_\_\_\_

**This is a LOCAL permit only. STATE permit(s) may be required. Contact the State permit specialist at (802) 279-4747.**

Application # \_\_\_\_\_ Name \_\_\_\_\_

**TOWN OF WHITINGHAM, VT**  
PO Box 529, Jacksonville, VT 05342  
(802) 368-7500

**APPLICATION FOR ZONING PERMIT**

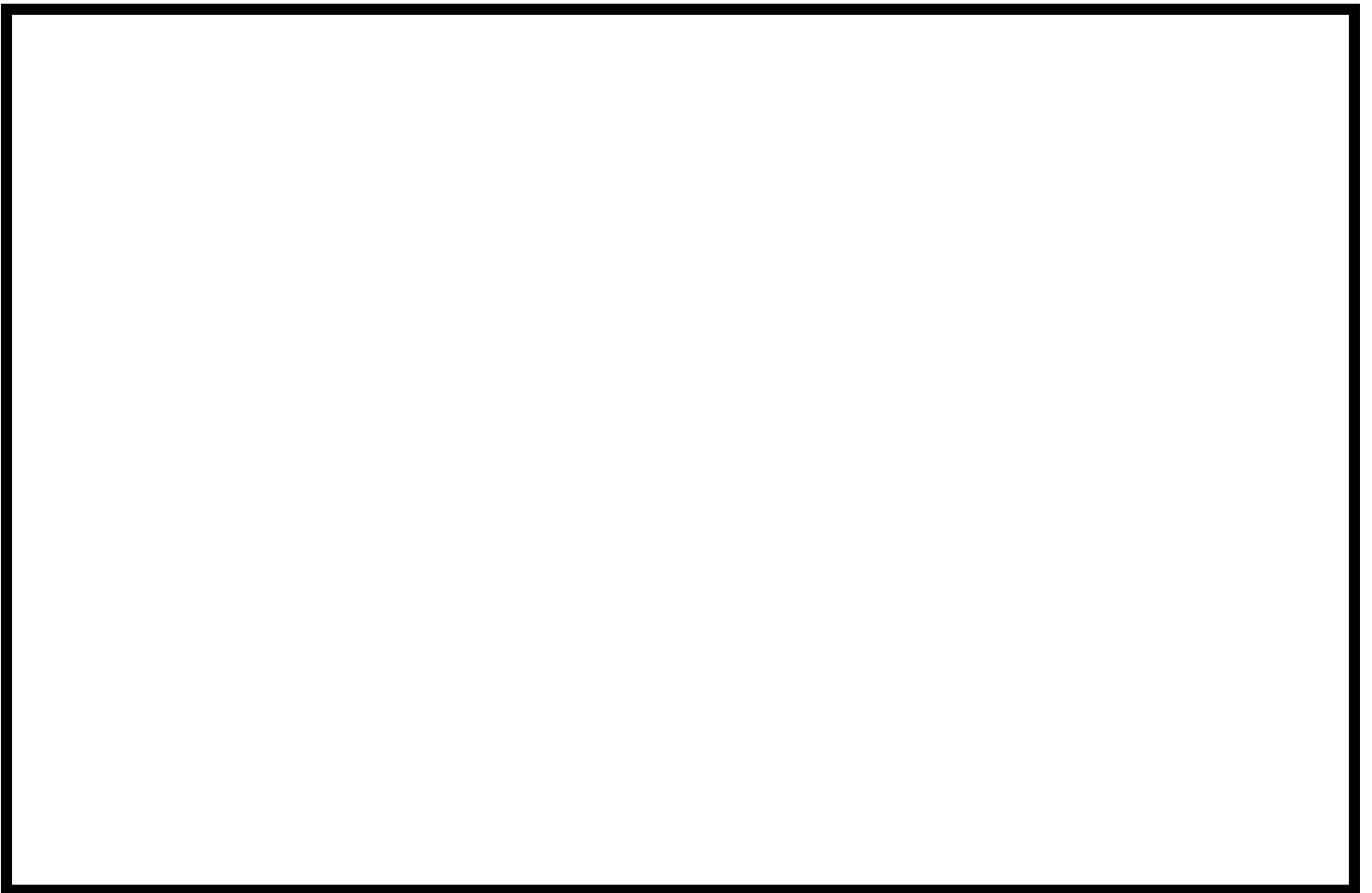
**PERMISSION TO ENTER THE PROPERTY:** Signing of this application authorizes the Zoning Administrator, Planning Commission, Zoning Board of Adjustment and/or Listers to enter onto the premises for the purpose of verifying the information presented.

The undersigned hereby affirms that all information presented in this application and all supporting forms, plans and documents is true, accurate, and complete and agree that, if any such information is found to be false or misleading, any permit or other approval granted on the basis of such information shall be deemed null and void. **Undersigned also affirms that he/she has contacted the State regarding needed permits.**

\_\_\_\_\_  
Property Owner Signature                      Date                      Applicant Signature                      Date

**PLOT PLAN / SITE PLAN**

This plan must show: Arrow pointing north \_\_\_ Street Name(s) \_\_\_ Property Lines & Dimensions \_\_\_  
Existing and Proposed Structures with dimensions \_\_\_ Parking Areas \_\_\_ Driveway(s) \_\_\_  
Setback Distances including from each side of property \_\_\_ Rear \_\_\_ Left Side \_\_\_ Right Side \_\_\_ Front  
Setback Distance from Center Line of Traveled Road (distances greater than 100 feet may be indicated as  
100'(+)) on the plan) \_\_\_ Streams, Rivers, Bodies of Water \_\_\_ Water Supply \_\_\_ Sewage Treatment Area



TOWN OF WHITINGHAM, VERMONT

APPLICATION FOR ZONING PERMIT INSTRUCTIONS

- 1. Fill in all the blanks, preferably in ink.
2. Applications must be deemed complete prior to action by Zoning Administrator.
3. If a question is not applicable, write "N/A".
4. Plot Plan/Site Plan must be complete and must accompany this application, if applicable.
5. All fees must be paid at the time of submittal.

Application forms are considered self-explanatory; however, the following explanations are offered for those lines where questions may arise:

Location of Property: E911 number and official street name (not PO Box, RD or RR).

Mailing Address: Provide entire current address including zip code.

Application is made to: Check those that apply (i.e. build + accessory structure to add a deck or build a shed).

Parcel Size/Acreage: Square feet or acreage (43,560 square feet in an acre).

Parcel Road Frontage: The road that the building faces.

Setbacks: Measured from the closest point of the existing/proposed building(s) to the property lines in a perpendicular direction. Front yard setback is measured from the center of the travelled road or right-of-way access.

Dimensions of building(s): width and depth of existing buildings and proposed buildings on lot.

Return the application, plot plan/site plan, and permit fee to the Town of Whitingham at PO Box 529, Jacksonville, VT 05342. If the Zoning Administrator finds that your application is complete and that it conforms to the Whitingham Zoning Regulations currently in effect, you will be issued a permit by mail.

If the Zoning Permit is approved, interested parties may appeal the permit approval to the Zoning Board of Adjustment within 15 days of such act or decision. An application for appeal shall be submitted to the Zoning Board of Adjustment and a copy filed with the Zoning Administrator. This permit shall not take effect until the time and such appeal has passed. Any appeals of a decision made by the Zoning Board of Adjustment or Planning Commission shall be made to the Windham Country Superior Court, Newfane, Vermont.

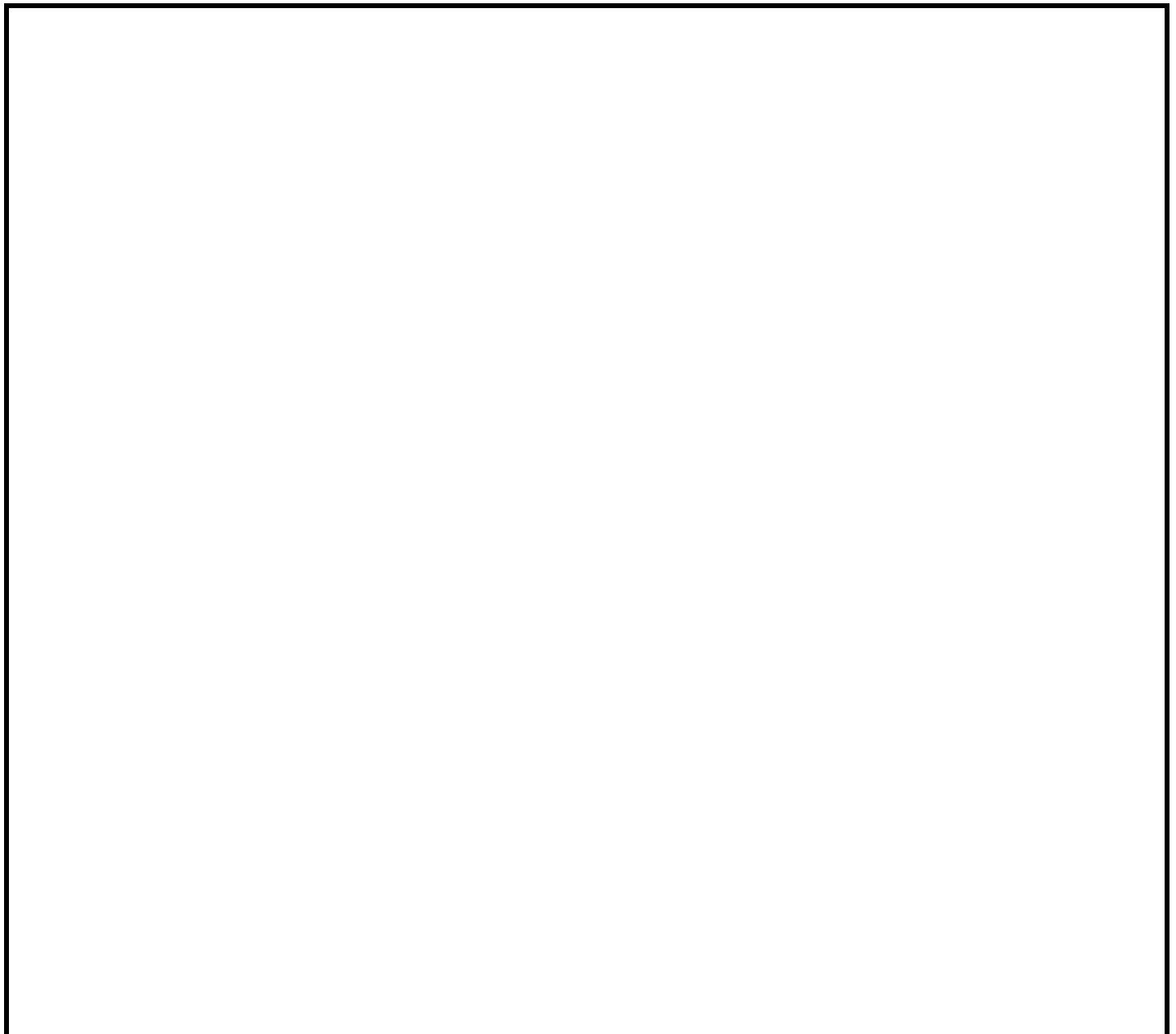
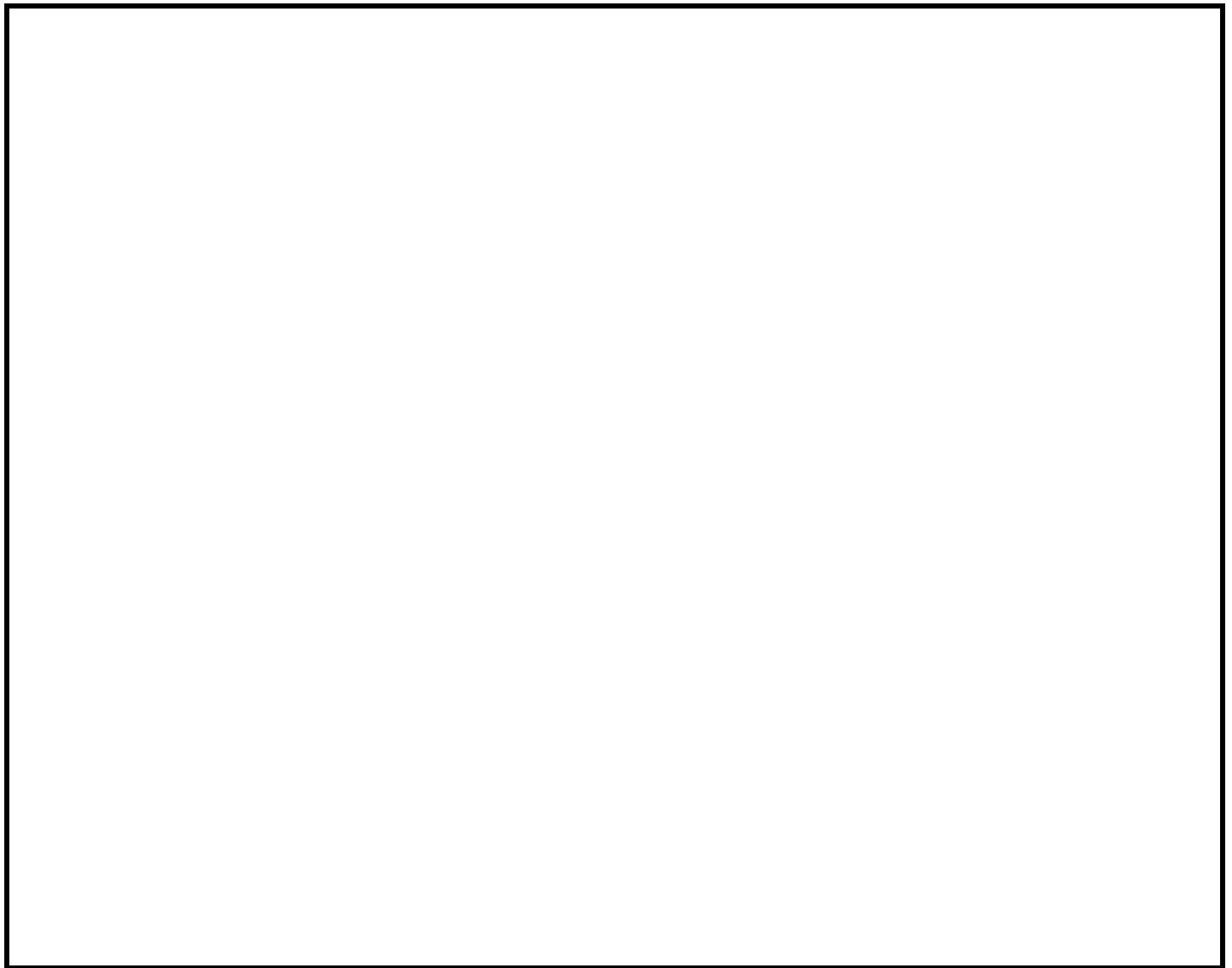
The Planning Commission has the responsibility to hear and decide upon applications for Right-of-Way for land without minimum required frontage. The Planning Commission shall act to approve or disapprove any such requested right-of-way within 45 days after the date of the final public hearing held, and failure to do so within such period shall be deemed approved. If you have any questions please contact the Zoning Administrator at (802) 368-7500.

FEES:

Table with 4 columns: Fee Item, Amount, Fee Item, Amount. Includes items like Single Family Building (\$100.00\*), Duplex Building (\$200.00\*), Multi-Family Building (\$150.00 per unit\*), Motel (\$50.00 per unit\*), Commercial/Industrial (\$200.00\*), Additional/Alterations (decks/porches) (\$25.00\*), Accessory Structures (\$25.00\*), Fences over 4.5 feet in height (\$25.00), Demolition (\$10.00), Signs (\$25.00), SubDivision (\$75.00 per new lot), Right-of-Way (\$75.00), Lot Line Adjustment (\$75.00), Change of Use (\$35.00), Primitive Camp (\$100.00\*), Zoning Board of Adjustment Hearing (\$150.00), Site Plan Review (\$150.00), Joint Hearing of Zoning Board of Adjustment and Planning Commission (\$200.00).

\*plus \$.05 per square foot
ALL permit applications require a \$20.00 recording fee.

This is a LOCAL permit only. STATE permit(s) may be required. Contact the State permit specialist at (802) 279-4747.



**This is a LOCAL permit only. STATE permit(s) may be required. Contact the State permit specialist at (802) 279-4747.**