EXHIBIT
F

TOWN OF UNDERHILL

ZONING PERMIT APPLICATION

OFFICE USE ONLY

APPLICATION #: CL-19-05

PROPERTY CODE: PV015

ZONING DISTRICT(S):

- ☐ Underhill Flats Village Center
- ☑ Underhill Center Village
- ☐ Rural Residential
- ☐ Water Conservation
- ☐ Mt. Mansfield Scenic Preservation
- ☐ Soil & Water Conservation

APPLICANT: MICHAEL DIFFENDERFFER

PROPERTY LOCATION: 15 PLEASANT VALLEY RD, UNDERHILL VT

MAILING ADDRESS: P.O. BOX 42, UNDERHILL CENTER VT 05490

EMAIL ADDRESS: m@diff.ws

PHONE NUMBER: 203-444-4766

LANDOWNER (IF DIFFERENT FROM APPLICANT):

LANDOWNER'S CONTACT INFORMATION:

CONTRACTOR:

CONTRACTOR'S CONTACT INFORMATION:

PROJECT DESCRIPTION: ADDING BACK PORCHES AND CREATING OFFICE + RESTURAUNT SPACE IN LOWER LEVEL

Section A

Zoning Permit Application Type:

- ☐ Agricultural Exemption (Requires VT Review)
- ☐ Boundary Line Adjustment Permit (see Supp. Form)
- ☐ Building Permit (see Section B)
- ☐ After-the-Fact Building Permit (see Section B)
- ☐ Conversion/Change of Use Permit (see Section C)
- ☐ Home Occupation Permit (see Supplemental Form)
- ☐ Sign Permit (see Supplement Form)
- ☐ Temporary Structure Permit
- ☐ Temporary Use Permit
- ☐ General/Other: _____

Section B

Building Permit Application Information:

- ☐ Accessory Dwelling (see Section D)
- ☐ Accessory Structure(s) (e.g. barn, garage, shed, etc.)
- ☐ Addition:
  - Number of Bedrooms (if applicable): ____
  - Number of Bathrooms (if applicable): ____
- ☐ Single-Family Dwelling:
  - Number of Bedrooms: ____
  - Number of Bathrooms: ____
- ☐ Two-Family Dwelling:
  - Dwelling 1 - Number of Bedrooms: ____
  - Dwelling 1 - Number of Bathrooms: ____
  - Dwelling 2 - Number of Bedrooms: ____
  - Dwelling 2 - Number of Bathrooms: ____
- ☐ Multi-Family Dwelling:
  - Number of Units: ____
  - Total Number of Bedrooms: ____
  - Total Number of Bathrooms: ____
- ☐ Commercial/Industry
- ☐ Carport
- ☐ Porch/Deck/Fence
- ☐ In-Ground Pool

Section D

Accessory Dwelling Application Information:

- ☐ Attached Accessory Dwelling, or
- ☐ Detached Accessory Dwelling

Square Footage of Principal Dwelling: _____ sq. ft.

Square Footage of Proposed Accessory Dwelling: _____ sq. ft.

Number of Bedrooms (in Accessory Dwelling): _____

Number of Bathrooms (in Accessory Dwelling): _____

Section C*

Conversion/Change of Use Application Information:

Existing Use: UNFINISHED LOWER LEVEL

Proposed Use: OFFICE + RESTURAUNT

# of Bedrooms Added (if applicable): ____

# of Bathrooms Added (if applicable): ____

*Please fill out this section if the project includes the conversion of unfinished living space to living space.

All construction is to be completed in accordance with the Town of Underhill Unified Land Use & Development Regulations, as amended, and any & all federal and/or State regulations currently in effect. Once approved, notice of the permit is required to be posed in a conspicuous location on the property during the appeal period. The Town recommends that that notice be posted during the duration of the construction period. The applicant and/or landowner is required to contact the necessary State agencies to obtain permits: (802) 477-2241 (permit specialist). Interest persons have the right to appeal the approval of a permit to the Development Review Board within fifteen days (15) from the date of issuance.

TOWN OF UNDERHILL

ZONING PERMIT APPLICATION

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PROPERTY CODE: PV015

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- ☐ Rural Residential
- ☐ Water Conservation
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PHONE NUMBER: 203-444-4766

LANDOWNER (IF DIFFERENT FROM APPLICANT):

LANDOWNER'S CONTACT INFORMATION:

CONTRACTOR:

CONTRACTOR'S CONTACT INFORMATION:

PROJECT DESCRIPTION:

MIXED USE BUILDING
MULTI FAMILY, OFFICE +
RESTURAUNT.
(SEE ATTACHED)

Section A

Zoning Permit Application Type:

- ☐ Agricultural Exemption (Requires VT Review)
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- ☐ Addition:
  - Number of Bedrooms (if applicable): ____
  - Number of Bathrooms (if applicable): ____
- ☐ Single-Family Dwelling:
  - Number of Bedrooms: ____
  - Number of Bathrooms: ____
- ☐ Two-Family Dwelling:
  - Dwelling 1 - Number of Bedrooms: ____
  - Dwelling 1 - Number of Bathrooms: ____
  - Dwelling 2 - Number of Bedrooms: ____
  - Dwelling 2 - Number of Bathrooms: ____
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  - Number of Units: ____
  - Total Number of Bedrooms: ____
  - Total Number of Bathrooms: ____
- ☐ Commercial/Industry
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- ☐ Detached Accessory Dwelling

Square Footage of Principal Dwelling: _____ sq. ft.

Square Footage of Proposed Accessory Dwelling: _____ sq. ft.

Number of Bedrooms (in Accessory Dwelling): _____
Number of Bathrooms (in Accessory Dwelling): _____

Section C*

Conversion/Change of Use Application Information:

Existing Use: UNFINISHED BASEMENT

Proposed Use: OFFICE + RESTURAUNT
# of Bedrooms Added (if applicable): ____
# of Bathrooms Added (if applicable): ____

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ZONING PERMIT APPLICATION

Dimensions of ALL Proposed Construction

Proposed Structure(s)	Front	Side	Side	Rear	Height (Max. 35 ft.	Square Feet Added
BACK PORCH	94'	8'	8'	94'	8'	752'
2ND STORY BACK PORCH	6	8	8'	6'	8'	48'
FINISHED LOWER	100'	30'	30'	100'	8'	3000'

Acreage: 1.1 **Frontage:** 232' **Estimated Value/Cost of Construction: $** 50,000

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Setbacks: To be measured as the closest part of ALL NEW CONSTRUCTION to the subject lot line and natural features.

Proposed Structure(s)	Front	Side	Side	Rear	River, Stream, or Ponds	Wetland

Site Constraints

- ☐ Class II Wetland
- ☐ Class III Wetland
- ☐ Wetland Buffers
- ☐ Deer Wintering Yard
- ☐ Floodplain: Zone _____
- ☐ Named River(s)
  - Named River 1: _____
  - Named River 2: _____
- ☐ Prime Agricultural Soils
- ☐ Unnamed Stream
- ☐ Source Protection Area
- ☐ Steep Slopes
- ☐ Very Steep Slopes

Building & Lot Coverage Information

a. Total # of Acres:	acre(s)
b. Total Lot Area (1 Acre = 43,560 sq. ft.):	sq. ft.
c. Footprint of Proposed Project (sq. ft.):	sq. ft.
d. Footprint of Existing Buildings (sq. ft.):	sq. ft.
e. Footprint of Proposed & Existing Buildings (sq. ft.):	sq. ft.
f. Total Building Coverage (line e / line b*100):	%
g. Total Impervious Service (sq. ft.):	sq. ft.
h. Total Lot Coverage (lines e + g / line b * 100):	%

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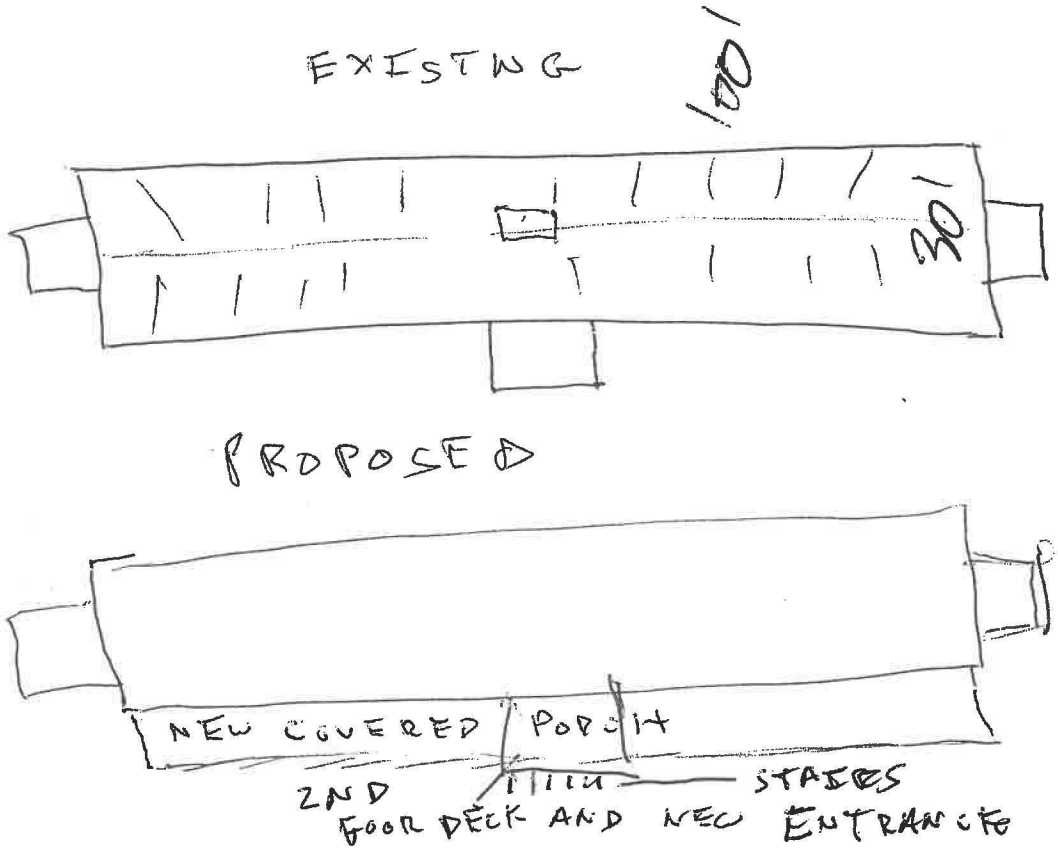
ZONING PERMIT APPLICATION

INSTRUCTIONS: Provide a sketch showing dimensions of the proposed construction. You may use another sheet or the space below.



Please Accurately Depict the Following (Checklist):

Required Features to Depict

- ☐ Location of Existing Property Boundaries
- ☐ Dimensions of Property's Boundaries
- ☐ Location & Footprints of Existing Structure(s)
- ☐ Location & Footprints of Proposed Structure(s)
- ☐ Location & Footprints of Existing Access Ways
- ☐ Location & Footprints of Proposed Access Ways
- ☐ Dimensions of Existing/Proposed Access Ways
- ☐ Setbacks from Property Boundaries
- ☐ Floor Plan of Proposed Structure(s)
- ☐ Height of Proposed Structure(s)

Required Features to Depict if Applicable

- ☐ Location of Existing/Proposed Easements
- ☐ Location of Existing/Proposed Rights-of-Way
- ☐ Location of Existing/Proposed Utilities
- ☐ Setbacks from Road Rights-of-Way
- ☐ Setbacks from Surface Waters & Wetlands
- ☐ Location of Existing/Proposed Water System (Well)
- ☐ Location of Existing/Proposed Wastewater Systems
- ☐ Other: _____

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ZONING PERMIT APPLICATION

The undersigned hereby requests a Zoning Permit for the construction project described in this application. By signing below, Applicant acknowledges that he/she/they will comply with the requirements of the permit, if granted, and all Town Regulations. **Separate State permits including, but not limited to, water/wastewater, stormwater, Act 250, and Construction General Permits may be required. The applicant bares the responsibility and obligation to contact the State Permit Specialist at 802-477-2241 prior to construction.**

The Zoning Administrator (or representative) may access the subject property for purposes of inspections before, during, and upon completion of the project. Upon approval, a Permit Notice sign will be supplied to the Applicant to be posted within view of a Town Highway until the 15-day appeal period expires. Interested parties may exercise their appeal rights pursuant to 24 VSA §4465.

Applicant and/or their consultant(s) should check with the Road Foreman for any posted road restrictions. Failure to substantially commence construction by the permit expiration date will require a new permit from the Zoning Administrator. Upon completion of construction, Applicant must contact the Listers' office and the Zoning Administrator to obtain a Certificate of Occupancy (where applicable).

Applicant Signature _____ Date 9/6/19

Landowner Signature _____ Date 9/6/19

OFFICE USE ONLY

☑ **RECEIVED:** Date 9/6/2019

☑ **DEVELOPMENT REVIEW BOARD REVIEW (IF APPLICABLE):**

☑ Required ☐ Not Required Hearing 10/21/2019

Date: 9/6/2019

☐ Conditional Use Review
☐ Site Plan Review
☐ Variance Request

Permit Fee	$	
Posting Fee	$	15.00
Recording Fee	$	15.00
TOTAL FEE	$	
☐ Check #		☐ Cash

☐ **APPROVED:** Date _____

Effective Date _____

Expiration Date _____

☐ **REJECTED:** Date _____

☐ **REFERRED (IF APPLICABLE):**

To: _____

Date _____

To: _____

Date _____

Comments/Conditions:

Zoning Administrator _____ Date _____

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EXIST ENG

60 30 0 60 Feet

1 inch = 61 feet

For Planning Purposes Only.
Scale and feature locations are approximate.
Map created 05/30/2019

PROPOSED

60 30 0 60 Feet

1 inch = 61 feet

For Planning Purposes Only.
Scale and feature locations are approximate
Map created 05/30/2019