



TOWN OF UNDERHILL

ZONING PERMIT APPLICATION

OFFICE USE ONLY

APPLICATION #:

B-20-14

PROPERTY CODE:

ST097

ZONING DISTRICT(S):

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

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: _____

APPLICANT:

Jonathan & Heather Fuller

PROPERTY LOCATION:

97 Stevensville Rd

MAILING ADDRESS:

97 Stevensville Rd Underhill VT 05489

EMAIL ADDRESS:

jonathanifuller@yahoo.com

PHONE NUMBER:

802.578.4812

LANDOWNER (IF DIFFERENT FROM APPLICANT):**LANDOWNER'S CONTACT INFORMATION:****CONTRACTOR:**

Tom Moore

CONTRACTOR'S CONTACT INFORMATION:

802.373.3733

PROJECT DESCRIPTION:

New Construction of a Single Family dwelling ~1600 sqft post and beam. This will be our Primary Dwelling when complete and the structure currently on the property will be converted to an accessory dwelling.

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: 3
 Number of Bathrooms: 2.5
 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: _____

Proposed Use: _____

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 posted 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.



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Dimensions of ALL Proposed Construction

Proposed Structure(s)	Front	Side	Side	Rear	Height (Max. 35 ft.)	Square Feet Added
Single Family Post and Beam	36	24	24	36	28	

➔
 Acreage: _____ Frontage: _____ Estimated Value/Cost of Construction: \$ _____
 ➔

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

Large empty rectangular area for providing a sketch of the proposed construction.

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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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

2020-06-06
Date

Landowner Signature

Date

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RECEIVED: Date 06/06/2020

DEVELOPMENT REVIEW BOARD REVIEW (IF APPLICABLE):

Required Not Required

Date: _____

Conditional Use Review

Site Plan Review

Variance Request

APPROVED: Date _____

Effective Date _____

Expiration Date _____

REJECTED: Date _____

Permit Fee	\$
Posting Fee	\$ 15.00
Recording Fee	\$ 15.00
TOTAL FEE	\$
<input type="checkbox"/> Check #	<input type="checkbox"/> Cash

REFERRED (IF APPLICABLE):

To: _____

Date: _____

To: _____

Date: _____

Comments/Conditions:

Zoning Administrator

Date

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