TOWN OF CABOT

Application for Zoning Permit

	All Informa	ιποn is requirea	for application approval								
Applicant Name			Parcel ID#								
Applicant Mailing Address			Landowner Name								
Applicant Phone Number a	and/or Email		Landowner Mailing Address								
Physical Location of Prope	rty (E-911 Address)		Landowner Phone Number and/or Email								
	N	EW CONSTRUCTION	ON INFORMATION								
A general plot plan sh	owing the location of	the property and	buildings or work area must be attached to the application.								
Length & Width (Ex 10' x20')	Height - Number of S	tories	Setback in feet : Front (road side) Rear Side Side								
Well/Water system	Septic (WW permit # or in	nstallation date)	Lot Size (acres) Frontage on Public Road (in feet)								
contained herein. The l year of the date of app Officer by submitting the	Permit is void in the proval. The Landown e appeal in writing t	event of misrepr ner or an interest o the Town Clerk	resentation or failure to undertake construction within one ted person may appeal this decision of the Administrative 's office within fifteen (15) days of the date of the decision.								
This ap	plication must be sig ttee retains the obli s for this project. Ca	gned by the Land gation to identifull Il Jeff McMahon	owner and submitted with a fee of \$60.00 y and apply for and obtain all other required permits and (802) 477-2241 or email jeff.mcmahon@vermont.gov to								
	undersigned hereby requests a Zoning Permit for the following use to be issued on the basis of the representations national herein. The Permit is void in the event of misrepresentation or failure to undertake construction within one har of the date of approval. The Landowner or an interested person may appeal this decision of the Administrative cer by submitting the appeal in writing to the Town Clerk's office within fifteen (15) days of the date of the decision. This permit shall not take effect and building may not commence until the time for such appeal has passed. This application must be signed by the Landowner and submitted with a fee of \$60.00 expelicant or permittee retains the obligation to identify and apply for and obtain all other required permits and levant state permits for this project. Call Jeff McMahon (802) 477-2241 or email jeff.mcmahon@vermont.gov to speak to the regional permit specialist Date Signature of Landowner										
	FOR	USE BY ADMINIST	RATIVE OFFICE ONLY								
Fee Paid \$	Date Received	Date Complete	Referred to the Development Review Board Date								

Approved	Denied	Reason for Denial		
Signed by Zoning	g Administra	ator	Date	Application No.

Questions? Please call the Cabot Zoning Administrator at 802-563-2041 or Town Clerk's Office at 802-563-2279.

Town of Cabot, PO Box 36, Cabot, Vermont 05647 - rev. 07/01/2022

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