



Zoning Permit Application

Should the scope of the work or use of the property change from that listed below this permit will be invalidated and a new Zoning Permit shall be required. Anyone found in violation of this permit may be subject to a fine of up to \$500 per day.

Tax Map # _____	Date _____
Property Location / Street Address _____	
Associated Building Permit # (if applicable) _____	

Owner _____
Address _____
City _____ State _____ Zip _____ Phone _____

Applicant _____
Address _____
City _____ State _____ Zip _____ Phone _____

Occupant / Tennant Contact Info _____
Address _____
City _____ State _____ Zip _____ Phone _____

Applicant Signature: _____

Zoning Classification of Site: _____	
Setback Requirements: Front: _____ Side: L _____ R _____ Rear: _____	

Zoning Variance Requested: _____ Date of Hearing: _____	
ARCHITECTURAL REVIEW REQUIRED: _____ Date of Review: _____	

Permit Fee: \$150.00	If less than \$5000 in improvements: \$75.00
Paid: _____	Date: _____
<i>Signature of Town Official</i>	

Fire Department Approval _____	Date _____
Water Department Approval _____	Date _____
Zoning Department Approval _____	Date _____