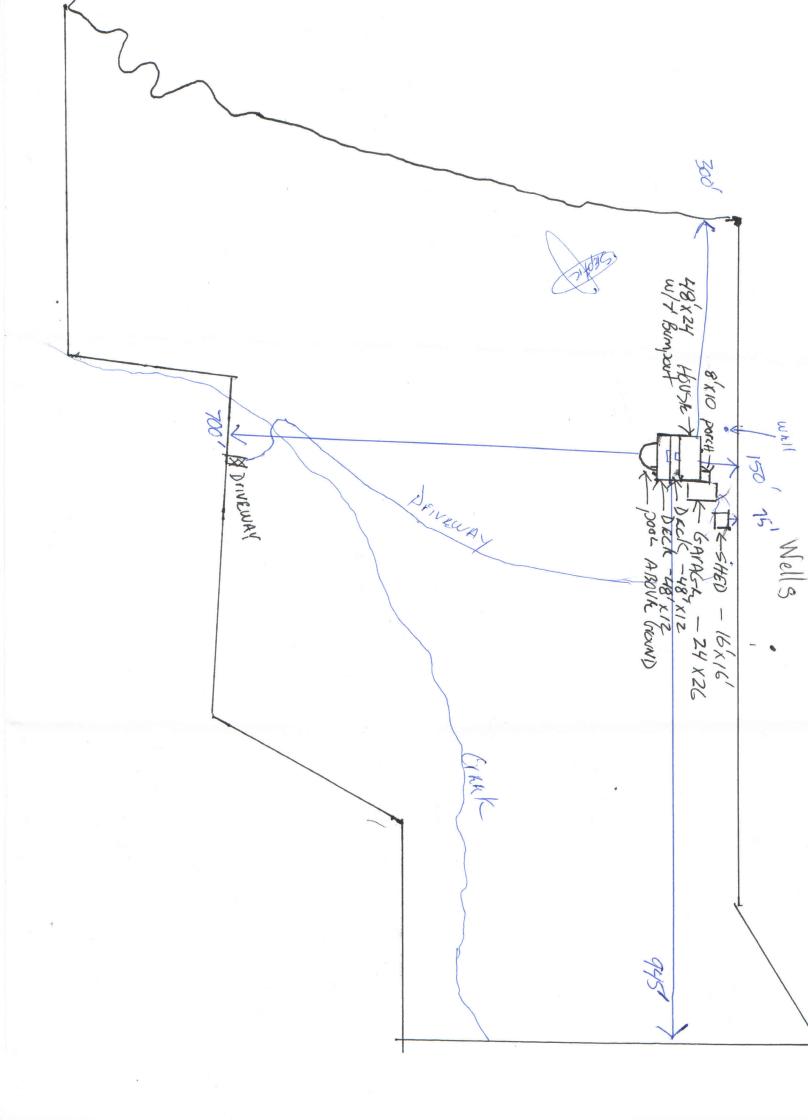
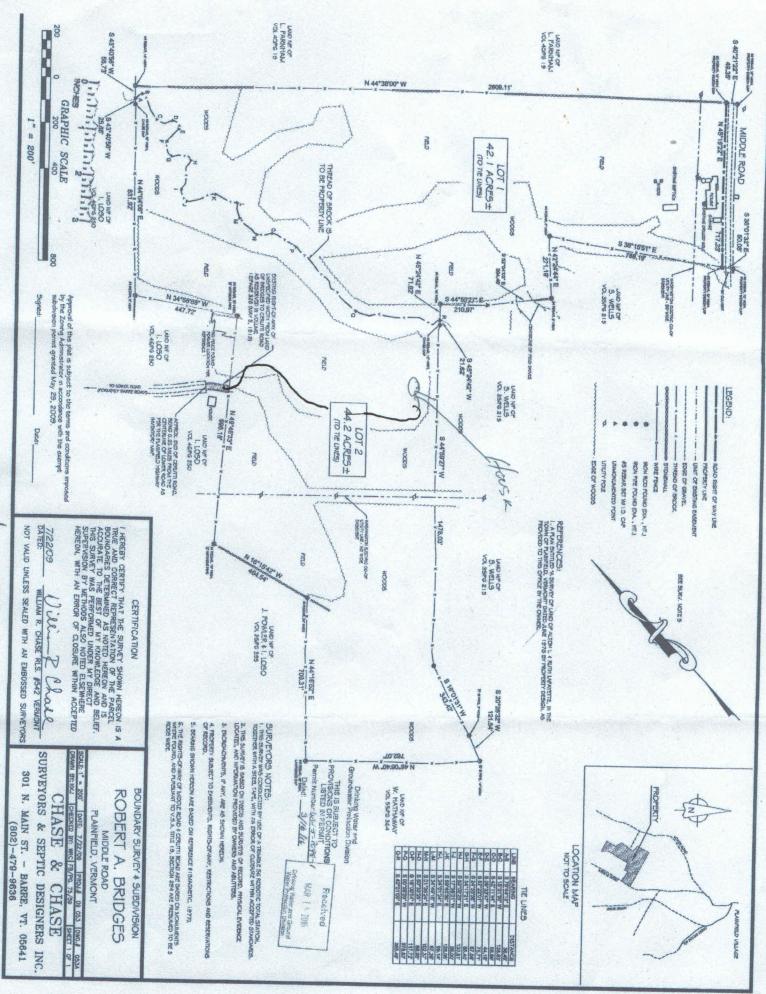
For Office Use		Town of	Plainfie	eld	Received	by Town Clerk	
ZP # <u>2021 - 56</u> Parcel # <u>007</u> -			phone: 802-454-	Plainfield, VT 05667-0. 8461 • fax: 802-454-8		Plair	field
Map # District: □ V □ RR ☑ F&A			£ 5.	ldza@gmail.com <b>mit Applica</b> t	tion		2 5 2021
No 911 address or Tax maple			This form serves	as the application for nd development revie	r all	12	30 PM
A Owne	r/Applic	ant Informati	ion			Cy)	
Property C	wner Na	me DANIEC	DUNBAR //	MARIA DHAEN	/h		
Mailing			535 CUTLER C	ORNER Rd	Apt/	Suite	
Address:	City 7	AVIA		State VT	Zip	05641	
Phone: Day	80Z-	279-93	3/ Evening &	102-479-1042	2 6	Prefer? 🗆 Da	ay 🗆 Eve 🔽 Either
Is Owner t Applicant?	he 🖾 ነ	No Provide	Site and Project Inform owner name and mailir nt information below. (,	ng address (above), ind	icate relation	ship to own	er, and complete
Relationship to Owner:		☐ Prospectiv☐ Architect/	ve Owner (have purcha /Designer		☐ Contractor	□ Le	essee
	ınt Name	:					
Ma the	iling	Street/P.O. Box		Apt/	Apt/Suite		
Add	ress:	City		State	Zip		
Phone:	Day		Eve	ning:		Prefer? 🗆 [	Day 🗆 Eve 🗆 Eithe
Site ar	nd Proje	ct Informatio	on				
Physical A	ddress (9	11) TBA					
In 100 Yr F	loodplai	n? 🗆 Yes (d	check Yes if any portion	of the parcel is in the	district)	Ø No ∕	ř.
48'x	Driv 24 Hc	SUSA WIT	······································	11, 48'X12 -/ 24 X2	Drck X 6 AHack	al gai	16'X16' SHELL  TAGE / 24' pool
associated of Signing as a	document n "Agent	ation submitte for Owner" inc	by agrees that the proposed, and that the work sh dicates that the person s ay be needed from the S	all conform to all appli signing has the permiss	icable town o sion of the lan	rdinances ar d owner to	nd regulations.
Indicate if	: 🗹 Pr	operty Owner	OR	Owner			
Signature:	Dan	al Sand	<u></u>	a a		Date:	3/18/21
			1	FFICE USE ONLY			
Permit fee	\$ 100	Recv	o'd by: Smuch	Recv'd from: Ou	nbar	Date:	3-25-202
Hearing fee	e \$	Recv	v'd by:	Recv'd from:		Date:	

## Plainfield Zoning Permit Application—side 2

<b>C Site Plan:</b> All applications must include a site plan showing the dimensions of the lot, the location of all existing structures, development (driveway, well, septic field), water bodies, and all proposed structures and development on the lot. Indicate the setback distances from roads, property lines, and surface waters to the nearest structures. The applicant is responsible for determining the property lines and setback distances.								
For a Sign: Submit the text, graphics, size, and a site plan map of the sign location on the building or lot.								
For a Subdivision: Was this parcel created after March 2004? Yes \(\subseteq\) No. For subdivisions and boundary-line adjustments, submit a sketch plan as per the Subdivision Regulations, Article II Subdivision Review Procedures.								
For Construction projects: In addition to the site plan map, an elevation is required for most commercial building proposals. Please answer the questions below for all construction projects:								
Is any portion of the building rented? $\square$ Yes $\square$ No	For residential structures, please indicate:							
Will project require an access permit (driveway opening)? ☐ Yes ☑ No	☐ Single-family ☐ Two-family ☐ Multiple units							
Will project disturb, grade, or excavate more than one acre of land? ☐ Yes ☑ No	For all projects involving single-family houses: <u>Existing Rooms</u> <u>New Rooms</u>							
Will project result in increased water	# Bathrooms 0 Z.5							
or sewer flow? 🗆 Yes 💆 No	# Bedrooms							
Does project require an Act 250 permit amendment? ☐ Yes ☐ No	# Kitchens							
Maximum building height: ZO feet								
Questions? Contact the Zoning Administrator, Karen Storey, at 454-7856 or plainfieldza@gmail.com								
Action by Zoning Administrator:   Incomplete 4/4/2021   Scomplete 4/8/2021    1.   Granted   Referred, date:   Denied, date:   Denied, date:   Reason/Comment:   WW-5-7.09B-2   GI   Adress i Tex Map # HBA # Approved fow 2P 2008 - 40 row    2.   Appealed to the DRB, date:   By:   Applicant Note: An Appeal of a decision or act of the Zoning Administrator must be made in writing to the Chair of the Development Review Board within 15 days of the decision or act.  3. Final Action: Permit # 2121-0 (a. Date issued: 0.4/10/2021   Effective date: 0.4/25/2021   DO NOT start this project prior to the effective date, as the statutes require a 15-day appeal period.  Zoning Administrator:   Zoning Administra								
E Development Review Board Action:								
1. Public notice date:	Hearing date:							
Continued to, hearing date(s):								
2.  Granted, date: Denied, date:								
Chair, Development Review Board:								





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