

For Office Use	
ZP #	2021-08
Parcel #	033-14 01
Map #	09-024.000
District:	<input type="checkbox"/> V <input type="checkbox"/> RR <input checked="" type="checkbox"/> F&A

Town of Plainfield

P.O. Box 217 • Plainfield, VT 05667-0217
 phone: 802-454-8461 • fax: 802-454-8467
 plainfieldza@gmail.com

Zoning Permit Application

This form serves as the application for all zoning permits and development reviews.

Received by Town Clerk
Plainfield
APR 02 2021
2:45 PM
<i>Smith</i>

A Owner/Applicant Information

Property Owner Name Ludmilla Kowalewicz	
Mailing Address:	Street/P.O. Box 189 Holden Rd Apt/Suite
	City Graniteville State VT Zip 05654
Phone: Day 607-599-3633 Evening =	Prefer? <input type="checkbox"/> Day <input type="checkbox"/> Eve <input checked="" type="checkbox"/> Either
Is Owner the Applicant? <input checked="" type="checkbox"/> Yes ... Skip to Site and Project Information, Section B, below. <input type="checkbox"/> No Provide owner name and mailing address (above), indicate relationship to owner, and complete Applicant information below. (All information will be sent to the Applicant when not the owner.)	
If not the Owner	Relationship to Owner: <input type="checkbox"/> Prospective Owner (have purchase agreement) <input type="checkbox"/> Contractor <input type="checkbox"/> Lessee <input type="checkbox"/> Architect/Designer <input type="checkbox"/> Agent <input type="checkbox"/> Other:
	Applicant Name:
	Mailing Address: Street/P.O. Box 1401 Gore Rd Apt/Suite City Plainfield State VT Zip 05667
	Phone: Day Evening: Prefer? <input type="checkbox"/> Day <input type="checkbox"/> Eve <input type="checkbox"/> Either

B Site and Project Information

Physical Address (911) 1401 GORE RD, PLAINFIELD, VT 05667
In 100 Yr Floodplain? <input type="checkbox"/> Yes (check Yes if any portion of the parcel is in the district) <input checked="" type="checkbox"/> No
Please briefly describe the project and/or request: 14ft x 16ft shed

C Site Plan: All applications must include a site plan. See the reverse side for more information. →

Signature: The below signed hereby agrees that the proposed work shall be done as represented on this form and the associated documentation submitted, and that the work shall conform to all applicable town ordinances and regulations. Signing as an "Agent for Owner" indicates that the person signing has the permission of the land owner to act on the owner's behalf. Note: Additional permits may be needed from the State of Vermont and/or the Town of Plainfield.

Indicate if: <input checked="" type="checkbox"/> Property Owner OR <input type="checkbox"/> Agent for Owner
Signature: Ludmilla Kowalewicz Date: 4.2.2021

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Permit fee \$ 50-	Recv'd by: Smith	Recv'd from: L.K.	Date: 4-2-2021
Hearing fee \$	Recv'd by:	Recv'd from:	Date:

Plainfield Zoning Permit Application—side 2

C Site Plan: 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 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? Yes No
 Will project require an access permit (driveway opening)? Yes No
 Will project disturb, grade, or excavate more than one acre of land? Yes No
 Will project result in increased water or sewer flow? Yes No
 Does project require an Act 250 permit amendment? Yes No

For residential structures, please indicate:
 Single-family Two-family Multiple units

For all projects involving single-family houses:

	<u>Existing Rooms</u>	<u>New Rooms</u>
# Bathrooms	_____	_____
# Bedrooms	_____	_____
# Kitchens	_____	_____

Maximum building height: 13 feet

Questions? Contact the Zoning Administrator, Karen Storey, at 454-7856 or plainfieldza@gmail.com

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D Action by Zoning Administrator:

incomplete 4/22/2021 or returned 5/12/2021

1. Granted Referred, date: Denied, date:

Reason/Comment:

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 # 2021-08 Date issued: 5/22/21 Effective date: 6/6/21
 DO NOT start this project prior to the effective date, as the statutes require a 15-day appeal period.

Zoning Administrator: 

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:

Important: An appeal from a decision or act by the Development Review Board must be made within 30 days from the date of action shown on lines D2 or D3 above. Said appeal is made to the Environmental Court under 24 V.S.A., §4471.

4.1.21

