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Po M	o # 2 0 ; arcel # 0 ap # 11	or Office Use 21-14 & 36-01 & -026.0 V □ RR □	30 100	phone: 802-454 plainfi Coning Per This form serve	Plainfield, VT 05 -8461 • fax: 802- eldza@gmail.com	667-0217 454-8467 ication	Town	ed by Town Clerk NOF Plainfid R 3 0 2021 130 AM Mich
A	Owner/	Applicant In	formation					
Pr	operty Ov	vner Name	Cons	slidate	d. Com	munu	ation	M 12
Ad	ddress:	Street/P.O. B City Pla 916-74	inful	Frening	Λ		036	
Is	Owner the oplicant?	e □ Yes No	Skip to Site (Provide own	and Project Inform or name and maili	ng address (above), indicate relat	ionship to ow	Day Eve Either
ner	Relationship to Owner:							
If not the Owner	Applicant Name: Gary H + Julie-Ann Graves							
	Maili	5	1/P.O. Box	140 Tou	ne A		ot/Suite	
	Addre	ess: City	Plain	ifuld	State V	T Zi	0561	7
	Phone: Day 802-454-7488 Evening: 802-454-7188 Prefer? □ Day □ Eve ☑ Eith							
В	Site and	Project Info	rmation					
Ph	ysical Add	lress (911)						
In	100 Yr Flo	odplain?	Yes (check	Yes if any portion	of the parcel is	in the district)	No	
Ple	ease brief	ly describe th	ne project a	and/or request:	Boune	lary	line	stment
C	Site Plan	n: All applicati	ions must inc	lude a site plan.	See the reverse si	de for more info	ormation.	→
Sign	ing as an '	cumentation su 'Agent for Owr	ibmitted, an ner" indicate	ees that the proposition of that the work shat the person needed from the S	all conform to all signing has the pe	applicable town rmission of the l	ordinances a	and regulations.
Ind	icate if:	Property	Owner Of	? ☐ Agent for	Owner			
Sig	nature: 🥻	see email	dated	Alprah 7,20	21 Signed &	g AlicanCo	chmDate:	4/7/2021/18

FOR OFFICE USE ONLY

Recv'd from:

Recv'd from: GGraves

Recv'd by: CSmit

Recv'd by:

Version 00/00/0000

Hearing fee \$

Permit fee \$ 100-

Date: 4-30-2021

Date:

Plainfield Zoning Permit Application-side 2

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 For residential structures, please indicate:								
Will project require an access permit Single-family ☐ Two-family ☐ Multiple units ☐ Cariveway opening)? ☐ Yes								
Will project disturb, grade, or excavate more than one acre of land? Yes No For all projects involving single-family houses: Existing Rooms New Rooms								
Will project result in increased water # Bathrooms # Bathrooms								
or sewer flow?								
permit amendment?								
Maximum building height: A//A feet								
Questions? Contact the Zoning Administrator, Karen Storey, at 454-7856 or plainfieldza@gmail.com								
Action by Zoning Administrator: 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 - 1464 Date issued: 5/22/2021 Effective date: 6/6/2021 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:								

