

# Town of Shrewsbury, VT

## APPLICATION FOR BUILDING PERMIT

No construction may start before permit is issued

**\*\*Permit is subject to 15 days appeal period\*\***

Location of Project: \_\_\_\_\_ Parcel ID # \_\_\_\_\_

Name of Owner/Applicant: \_\_\_\_\_

Tel. #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Name of Co-Applicant: \_\_\_\_\_

Tel. #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Description of Project (please include changes, if any, to the number of bathrooms and/or bedrooms in the structure): \_\_\_\_\_  
\_\_\_\_\_

Dimensions of Structure(s): \_\_\_\_\_

Setback From Centerline of Road (in feet): \_\_\_\_\_

Setback From Side Property Lines (in feet): \_\_\_\_\_

Setback From Rear Property Lines (in feet): \_\_\_\_\_

Setback From Shoreline of Any Stream, Lake, or Wetlands (in feet) : \_\_\_\_\_

Please draw a detailed sketch of your lot and the location of the proposed structure on the back of this application. Please include all dimensions and the interior layout of the structure; all lot dimensions; setbacks from the proposed structure to the side, rear, and front property lines; proposed or present location of your sewer and water; any existing structures on your lot; and a North arrow.

**It is understood and agreed that I will abide by the Shrewsbury Unified Zoning and Subdivision Regulations as last adopted by the Town of Shrewsbury or as hereinafter from time to time amended. This permit is voided in the event of misrepresentation or failure to undertake construction within the time period prescribed in Article III Sec. 332 and Sec. 333.**

**I hereby certify that the above information is correct and that this parcel of land is in compliance with the Town of Shrewsbury Unified Zoning and Subdivision Regulations.**

Signature of Owner/Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Co-Applicant \_\_\_\_\_ Date \_\_\_\_\_

**The Applicant is Responsible for any State Permits Required  
Please contact Rick Oberkirch, State Permit Specialist at 282-6488 with questions.**

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Administrative Use Only

Zoning District of Lot: \_\_\_\_\_ Fee Received: \_\_\_\_\_ Fee Due: \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Reasons for Denial: \_\_\_\_\_  
\_\_\_\_\_

Notes: \_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Application No. \_\_\_\_\_ Date Received \_\_\_\_\_