

**Town of Shrewsbury, VT**

Office of the Zoning Administrator - 2318 Lottery Road - Shrewsbury, Vermont 05738  
Phone (802) 492-3578 - Email raymond@vermontel.net

**Application to the Development Review Board**

**Property Address:** \_\_\_\_\_  
**Applicant Name:** \_\_\_\_\_ **Owner Name:** \_\_\_\_\_  
**Mailing address:** \_\_\_\_\_ **Mailing Address:** \_\_\_\_\_

**Type of Application (check all that apply):**

- Appeal from a decision of the Administrative Officer (Zoning Administrator).
- Application for Conditional Use Review (including Special Features Overlay Zones).
- Historic District Review.
- Waive/Variance from Dimensional Requirements.
- Other.

**Please describe your request in detail:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**What to submit with this application:**

**For Appeal of Administrative Officer’s Decision** a copy of the appealed decision and any additional information needed to explain the appeal. **For Conditional Use Review and Waiver/Variance requests** a site plan (map drawn to approximate scale that includes all property boundaries, adjoining landowners, existing and proposed structures, easements, landscaping, existing and proposed drive-ways and curb cuts, contours, any land use or deed restrictions, a North point, the name of the preparer of the site plan, and the date of that preparation, and any other information needed to advise the Board fully in reference to the application. **For Historic District Review** provide building elevations, a description of building materials, and a simple site plan.

**Provide a recent history of the property to include any previous permits or subdivisions:**

\_\_\_\_\_  
\_\_\_\_\_

**Provide the names and addresses of all adjoining landowners (include a separate sheet, if needed):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Applicant Signature/Date**

**Applicant Signature/Date**

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**Owner Signature/Date**

**Owner Signature/Date**

**Fee \$150 received \_\_\_\_\_ Date received by ZA \_\_\_\_\_ Date hearing scheduled \_\_\_\_\_**