



BUILDING & ZONING PERMIT

ZONING ADMINISTRATOR
PO BOX 317, CONCORD, VT 05824
802-695-1094 EXT 24

ZONINGADMIN@CONCLERK.COM

TOWN OF CONCORD

PERMIT FOR 3681 SHADOW LAKE RD

Please use this form to request a zoning permit as required in the Concord Town Zoning Bylaws available at www.concordvt.us/zoneadmin.php. It is **HIGHLY RECOMMENDED** that applicant discuss the application and requirements with the Zoning Administrator prior to submission to ensure that all necessary information is submitted and to ensure efficient and timely processing of the application.

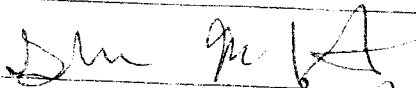
Applicant Last Name	MCINTIRE		First	GLENN		Daytime Phone	(781)254-2241(B)	
Applicant Mailing Address	P.O. Box 121			E-mail Address	Apartment #			
City	CONCORD		State	VERMONT		ZIP	05824	
Property Owner Last Name (if different than applicant)	MCINTIRE		First	GLENN		Daytime Phone	(781)254-2241	
Property Owner Mailing Address	P.O. Box 121			E-mail Address	Apartment #			
City	CONCORD		State	VERMONT		ZIP	05824	
Parcel ID #	792.001		Book	65		Pages(s)	200	
Areas of Lot in Acres	10		Length of Lot in Feet	2061		Width of Lot in Feet	313	
Dimensions of Proposed Building	Width	10		Length	20 22		Will the Building be Occupied for Living Space	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Distance Between Building Lines & Lot Lines	Front	60		Side	155		Side	155 Rear 2000
Proposed Use and/or Construction	STORAGE 10X20 LOFTED BARN (SHED)							
I/we, the undersigned, request a zoning permit for the use and/or construction stated, to be issued on the basis of the representation contained in this application and any required submission materials. I/we fully understand that any incorrect or misleading representations may result in the permit becoming void and legal action instituted by the Town of Concord. I/we further understand that the permit may contain conditions with which I will be required to comply.								
Applicant's Signature								
Owner's Signature (if different than applicant)								

1. The fee for a building/zoning permit is \$25.00 for under 250 square feet and \$50.00 for 250 square feet and over. The fee for a certificate of compliance is \$25.00. If your permit requires a hearing, costs of recording, advertising, and postage will be charged to you in addition to the permit fee. Both fees totaling \$50 (zoning permit fee and certificate of compliance fee) are made payable to the Town of Concord at the time the initial application is submitted.
2. State permits may be required before any construction may commence. The Zoning Administrator will provide guidance concerning state permits and additional information concerning state regulations can be found at the Vermont Agency of Natural Resources at www.anr.state.vt.us under permits or by calling 802-751-0127.
3. In accordance with the town's bylaws, prior to issuing a permit for the construction of a new building, or substantial improvement of existing buildings, or for development in the floodway, the Zoning Administrator shall mail a copy of the application to the Vermont Agency of Natural Resources in accordance with Section 4424 of the Act. A permit may be issued only following receipt of comments from the Agency of or the expiration of 30 days from the date the application was mailed to the Agency, whichever is sooner.
4. This application may be referred by the Zoning Administrator to the Zoning Board of Adjustment for approval. If so, you will be contacted with regards to establishing a hearing date.
5. Upon receipt of an application by the Zoning Administrator, he/she will act on said application within 30 days. You may appeal the decision of the Zoning Administrator. The appeal must be made to the Zoning Board of Adjustment within 15 days of the decision.
6. A permit does not take effect until 15 days after issuance during which time it will be posted in the municipal office and a Red Permit poster will be posted on your property in plain view for 15 days. **Construction shall not commence until after the 15 days from issuance have lapsed and the Zoning Administrator confirms construction may commence.**
7. If the zoning permit is approved, all development authorized by its issuance shall be substantially commenced within one year of its date of issue, or the zoning permit shall become null and void and reapplication shall be required to continue development.
8. If your proposed project requires road access you must apply for a driveway / right-of-way permit. There is a \$20.00 fee for this permit. For questions, please contact Dane Thorgalsen, Road Foreman at (802-695-8144).
9. Upon completion of the project and **prior to usage**, an approved **Certificate of Compliance** is required. Penalties may be imposed for non-compliance.
10. If you should have any questions or need assistance in filling out this form, you may contact the Zoning Administrator.

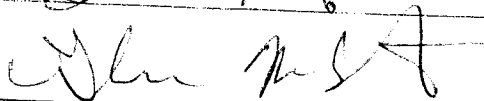
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I/we have read and fully understand my responsibilities regarding all requirements listed above and representations contained herein are true to the best of my/our knowledge.

Applicant's Signature



Owner's Signature
(if different than applicant)



ZONING FEES

Please attach payment for the applicable fees as outlined below. Checks should be made payable to The Town of Concord.

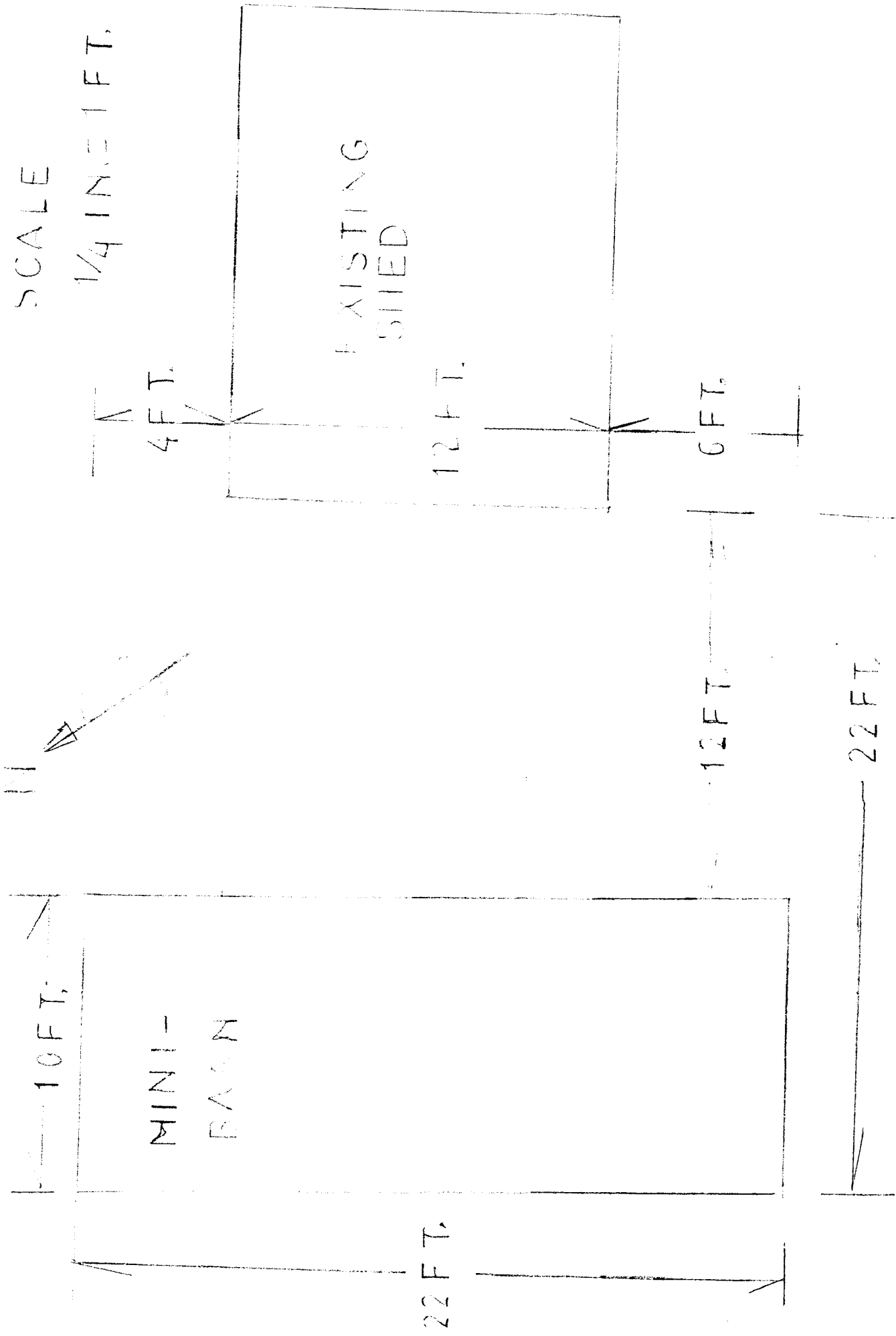
• Building/Zoning Permit for Under 250 Square Feet of Construction and Certificate of Compliance Fee	\$25.00 each - Total due \$50.00 upon submission of application.
• Building/Zoning Permit for 250 Square Feet or Over of Construction and Certificate of Compliance Fee	\$50.00 for Permit \$25.00 for Compliance Fee Total Due \$75.00
• Appeal/Variance/Conditional Use Fee	\$125.00
• Subdivision Fee (per lot)	\$50.00
• Drive-way/Right of Way Fee	\$20.00

SITE PLOT PLAN COMPLETION INSTRUCTIONS

All applications for building/zoning permits must include a plot plan. The Zoning Administrator cannot act upon a permit with incomplete information. Any application that does not include a plot plan or includes an incomplete plot plan will be returned to the applicant.

The following information **must** be included in the plot plan:

1. Road name and location or road.
2. An arrow indicating which direction is true north.
3. Scale at which plot plan is drawn.
4. Boundaries of the lot and name and addresses of all abutting property owners.
5. Locations and dimensions of other buildings presently on the property, if any.
6. Locations and dimensions of proposed buildings (including height).
7. Uses of existing and proposed buildings (including # of stories).
8. Distance between buildings presently on the property and new buildings to be constructed.
9. Proposed set-backs from street line, each side and rear lot line.
10. Indicate where the water system and the septic system are to be if applicable to your proposed project.
11. If an adjacent landowner has water rights or right of way on your property, indicate same and give the name of the landowner.
12. Indicate on the map any wetlands, rivers, and/or streams.



SCALE

1/4 IN. = 1 FT.

4 FT.

EXISTING
SIIDED

12 FT.

6 FT.

N

10 FT.

MINI-
RACK

22 FT.

12 FT.

22 FT.

1860.68

4203

10.0

Potter

1976.45

420

10.0

McIntire

2061.93

4

1

Norrie

2154.66

McCarty

376

4203811

10.0 AS

195

276.34

Gingue

782.38

512.90

303.98

313.49

60 FT

SHADOW

311.0

320.2

Date Received by Zoning Administrator		08/31/2021		Initials		A. Grenard	
Application #		2021-41		Fee Paid \$ 50.00		Cash	
Approved	<input checked="" type="checkbox"/>	Denied	<input type="checkbox"/>	Returned Incomplete	<input type="checkbox"/>	Extension of Permit	<input type="checkbox"/>
Date of Inspection		09/01/2021		Date Decision Made by ZA		09/01/2021	
Reasons for Denial							
Date Referred to Board of Adjustment		Conditional Use	<input type="checkbox"/>	Variance	<input type="checkbox"/>	Appeal	<input type="checkbox"/>
Zoning Administrator's Signature		Audra Grenard					

BOARD OF ADJUSTMENT OFFICE USE ONLY

At a meeting of the Board of Adjustment on _____ 20____ the above application for a permit was considered and is hereby:

Approved	<input type="checkbox"/>	Denied	<input type="checkbox"/>
Reasons for Denial			
Board of Adjustment Representative Signature			

CONCORD, VERMONT TOWN CLERK'S OFFICE

Received for record on _____ 20____ at _____ o'clock _____ minutes and duly recorded in:

Book	<input type="text"/>	Page(s)	<input type="text"/>
Attest: Town Clerk / Assistant Town Clerk Signature			