

ZONING PERMIT APPLICATION

M# _____

PH# _____

TOWN OF BETHEL

1. Name of Applicant _____ Daytime Phone _____
Address _____

2. Name & Address of Property Owner (if different) _____

3. Lot Size _____ 4. Present Use _____

5. Location of Property _____

6. Description of Proposed Development _____

* Will you be residing on the property while construction takes place? Yes _____ No _____

7. Off-street Parking Spaces _____ 8. Sewage Disposal _____ 9. Water Supply _____

10. Is the Slope of Land where Development is to Occur Greater than 15%? Yes _____ No _____

11. Will a New Property Access (Driveway) be Necessary? Yes _____ No _____

12. Will any Excavation be Required in the Public Right of Way? Yes _____ No _____

13. Refer to #3 Above (Lot Size). Does either the Applicant, or the current Property Owner, own any additional adjoining land? Yes _____ No _____

14. Submit a Sketch of the Proposed Development per Instructions on the sketch sheet provided.

The Applicant certifies that the information provided on this application is correct to the best of (his/her) knowledge or belief:

(If applicable) The undersigned Property Owner hereby certifies that the Applicant has the Owner's authorization to request approval for the proposed development:

Signature _____ Date _____

Signature _____ Date _____

For Completion by Town:

Fee Paid: _____

Received at the Office of the Town Manager:

District: _____

Required: Lot Size _____ Set Backs _____

Signature _____ Date _____

Findings & Action by the Zoning Administrator:

1. Use Category of Proposed Development _____ 2. Status in District _____

3. a. Development Review Board Review: _____

b. Curb Cut/Excavation Ordinance: _____

c. Health Regulations: _____

d. Subdivision Regulations: _____

4. Notes or Conditions: _____

Permit Approved: Your application for a zoning permit has been approved. This form and any attachments constitute your permit and authorizes the development described hereon. This permit shall not become effective until _____ and no development can be started before that date. Your Notice must be posted within the Town Right of Way in plain view to the public. In the event this permit is appealed, it shall not take effect until such appeal is decided in your favor. All development activities authorized by this permit must be completed within two years of the date stated immediately below or this permit shall become null and void. Approval granted by this permit satisfies only ordinances for the Town of Bethel. It is the Applicant's responsibility to obtain any other necessary permits from Regional or State agencies. The Administrative Officer may conduct inspections to determine compliance with the terms of this permit and Bylaws.

Date _____

Administrative Officer _____

Zoning Permit Application Sketch Sheet

1. Select an appropriate scale and draw your proposed development as viewed from above. Indicate the scale, i.e. one block equals _____ feet. Show property boundary lines if scale allows.
2. Show any significant site features such as drives, rights-of-way, parking areas, existing structures, water courses, etc.
3. Show any distance from proposed construction to edge of public right-of-way & ALL property lines.
4. Show North arrow.
5. Show name of public road providing access.
6. Signature of Applicant _____ Date _____

A large grid for sketching the proposed development. The grid is composed of 20 columns and 30 rows of small squares, providing a scale for drawing the site plan.