

Application # _____
Tax Map # _____
Zone _____

Development Review Board Hearing Application Town of Northfield, Vermont

Property Location _____

Applicant Name _____ Phone _____

Mailing Address _____

Owner Name _____ Phone _____

Mailing Address _____

Type of Application (check one):

- Variance from the Zoning District dimensional requirements
- Waiver of Zoning District dimensional requirements
- Conditional Use approval
- Appeal of a decision of the Administrative Officer

Hearing Fee	75.00
Recording Fee	10.00
Total Fees	\$ 85.00
Paid date & initials: _____	

Project Description _____

Relevant Section(s) of Zoning Ordinance _____

The undersigned property owner hereby certifies that the information submitted in this application regarding the property is true, accurate, and complete, and that the applicant has full authority to request approval for the proposed use of the property and any proposed modifications.

Signature of Owner _____ Date _____

Signature of Applicant _____ Date _____

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DRB Review

- Hearing Scheduled _____
- Request Denied
- Approved

Conditions of approval:

- Permit Issued, Effective _____

Zoning Administrator Signature _____ Date _____