

BUILDING PERMIT

Spahr
264-083-10143

TOWN OF GREENSBORO
PO Box 119, Greensboro, VT 05841
(802) 533-2640 Fax (802) 533-2191
zoning@greensborovt.org

FOR ADMINISTRATIVE USE ONLY

Application Number: 2019-018 Tax Map Number 22-21-40
Zoning District Lakeshore CK#
Date Application Received 7/17/2019 Fee Paid \$ 1081 amf 740
Conditional Use - Variance - Tear Down / Rebuild CK# 1082 \$220
8.9. A3 B C1 C3

Please provide all of the information requested in this application. Failure to provide all required information will delay the processing of this application. Submit the completed application and a check payable to the Town of Greensboro.

Applicant(s):

Name(s): VALERIE CARTER - CHARLES CARTER JR
Mailing Address: PO BOX 274 GREENSBORO VT 05841
Telephone(s) Home: 802.533.2961 Work: _____ Cell: 919.414.5035
E-Mail: valcarter123@gmail.com

Landowner(s) (if different from applicant(s)):

Name(s): same
Mailing Address: _____
Telephone(s) Home: _____ Work: _____ Cell: _____
E-Mail: _____

Physical Location of Property (911 address):

99 Spahr Road GREENSBORO VT

Necessary Permits:

- State Septic Permits - required prior to approval N/A no permits needed/no utilities on site
- State Potable Water Supply Permits - required prior to approval N/A or planned.
- Site visit approval **Application cannot be approved until after site visit by the zoning administrator.**

Schedule site visit when completed application is submitted. Visit Waived _____

- Curb Cut - requires a separate application - necessary if a new driveway must be installed.
[] Applied (date) _____ [X] Not required

Property Description:

Acreage in lot .15

(Please Note: If your property is enrolled in the Current Use Program, your building application may impact your Current Use status. Please verify your status with Vermont Property Valuation and Review, Current Use Program at 802-828-6633).

Feet of Road Frontage 50 feet

Setbacks: Front 22 (to center of road) Left Side 32
Right side 6 Rear 34 from Rd to end of bldg.
Lakeshore 50 Other 27 set back from Rd.

Permission to Enter Property & Applicant Certification Signatures

Signing of this application authorizes the Zoning Administrator to enter onto the premises for the purpose of verifying information presented.

The undersigned hereby certifies that the information submitted in this application regarding the above property is true, accurate and complete and that I (we) have full authority to request approval for the proposed use of the property and any proposed structures. I (we) understand that any permit will be issued in reliance of the above representations and will be automatically void if any are untrue or incorrect.

This permit is void if the development under this permit is not begun within one year of the date of approval or if construction is not completed within two years.

Construction may not be started until 15 days from the date of approval on this permit.

✓ Signature of Applicant(s) Walesie Carter/Charles Carter, Jr Date 7/12/2019
✓ Signature of Landowner(s) Walesie Carter/Charles Carter, Jr Date 7/12/2019

Note: Failure to develop your property in accordance with your application and any conditions of this permit may result in an enforcement action and may affect your ability to sell or transfer clear title to your property.

Appeal from a decision or act of the Zoning Administrator must be made in writing to the Development Review Board, c/o the Town Clerk's Office at the address shown above, with the appropriate fee, within 15 days of the decision or act. Failure to appeal this decision will mean that all interested persons are bound by this decision and will foreclose these persons from contesting this decision either directly or indirectly in the future. **This permit shall not take effect until the time for such appeal has passed.**

Please note that this is only a local permit and state permits may be needed for your project. Please contact the Permit Specialist at the VT Agency of Natural Resources at (802)751-0130.

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{ } Approved { } Denied {✓} Referred to the Development Review Board

Date: 7-17-19 Signature: _____

Remarks and/or Conditions: _____

Date of Approval or Denial by Development Review Board: _____

Applicant/Landowner Received a Copy of the Applicable Building Energy Standards: _____ (Date) _____

Applicant/Landowner Did NOT Need to Receive a Copy of the Applicable Building Energy Standards (Due to the fact that the structure will not be heated or cooled): _____ (Date) _____

Dimensions of Proposed and Existing Buildings:

Proposed:

Length 20 ft 3 in. No. of Stories 1

Width 12 ft 4 in.

Height 15 ft

+ Ramp 37.5 in. x 8 ft 6.5 in.

Existing use and occupancy. (If there are no buildings currently on the property, please write "bare land.") Storage shed

Existing:

Length 20 ft 3 in. No. of Stories

Width 12 ft 4 in.

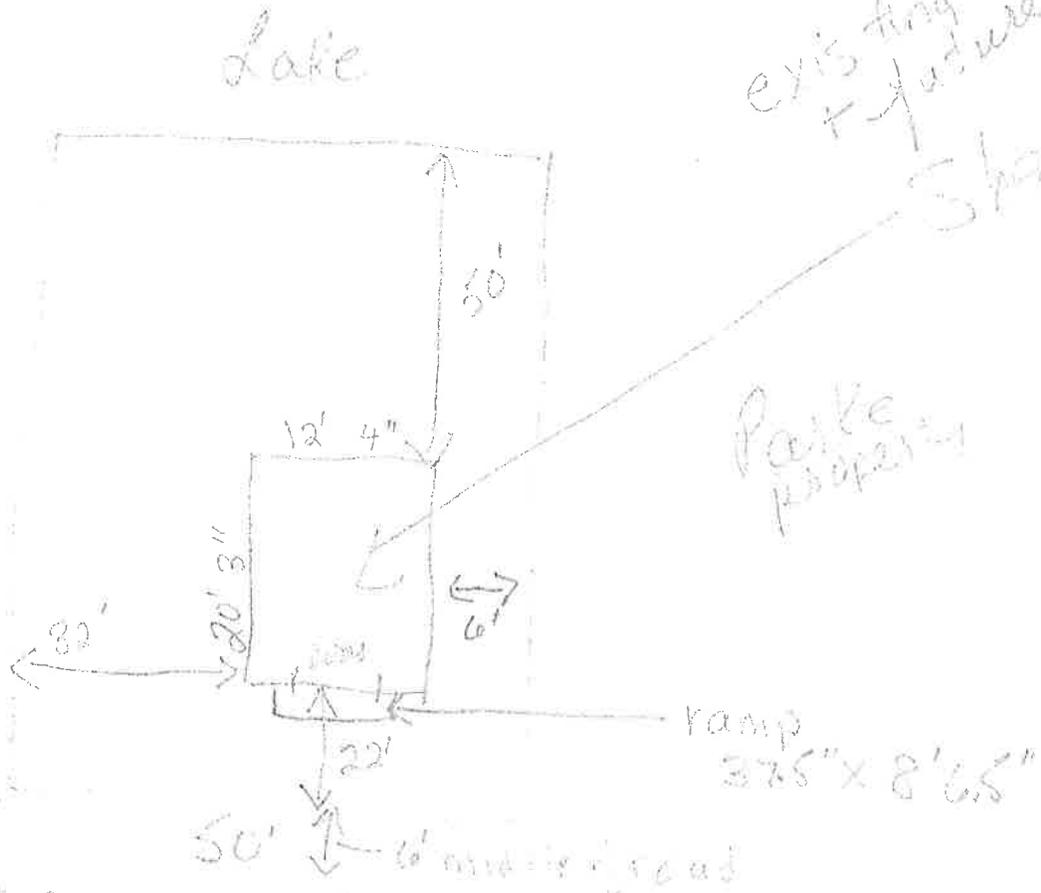
Height 15 ft to peak of roof

+ Ramp 37.5 in. x 8 ft 6.5 in.

Proposed use and occupancy. (Write whether it will be seasonal or full year. If you decide to change the use of your property later you may need another permit.)
Storage shed

Sketch or attach a general plot plan showing the following:

1. Location of property.
2. Location of buildings on property.
3. Location of driveway.
4. Location of well and septic system.



99 Spahr Rd

