

DANVILLE ZONING APPLICATION

FOR ADMINISTRATIVE USE ONLY

APPLICATION# 2023-68

DATE RECEIVED: 10/17/23

FEE PAID: 10/17/23

#35 ck#1272

DO NOT WRITE ABOVE THIS LINE:

Step 1: TYPE OF PERMIT REQUESTED AND FEE

*Needs to go before Development Review Board

- ☒ PERMITTED USE (\$35) ☐ SUBDIVISION (\$65) * ☐ DESIGN CONTROL (\$65) *
☐ CONDITIONAL USE (\$65)* ☐ VARIANCE (\$65) * ☐ WAIVER (\$65) *

Step 2: ZONING DISTRICT (choose one)

- ☐ MEDIUM DENSITY RESIDENTIAL 1 ☐ MEDIUM DENSITY RESIDENTIAL 2 ☐ VILLAGE RESIDENTIAL
☒ LOW DENSITY RESIDENTIAL ☐ DESIGN CONTROL OVERLAY ☐ HISTORIC NEIGHBORHOODS
☐ DEVELOPED SHORELAND OVERLAY ☐ ROUTE 2 ☐ CONSERVATION ☐ VILLAGE CORE

Step 3: APPLICANT/PROPERTY OWNER: (PLEASE PRINT – if more than one PROPERTY OWNER a separate sheet can be attached)

APPLICANT NAME(S): Matthew & Kimberly Prohaska

APPLICANT'S MAILING ADDRESS: 69 Griggs Hill Road, Danville

CONTACT NUMBER: 404-641-9245 EMAIL: mprohaska@gmail.com

Property Owner Name(s) MUST be the same as recorded on deed. If more than one, separate sheet can be added.

PROPERTY OWNER NAME(S): MATTHEW AND KIMBERLY PROHASKA

PROPERTY OWNER'S MAILING ADDRESS: 69 GRIGGS HILL RD, DANVILLE, VT 05828

CONTACT NUMBER: 404-641-9245 EMAIL: MPPROHASKA@GMAIL.COM

Step 4: PHYSICAL LOCATION OF PROJECT PROPERTY (911 ADDRESS):

Parcel ID# TH052-006.000 DEED: BOOK# 154 PAGE# 471-472

IS PROPERTY ON TOWN WATER AND/OR SEWER? ☐ YES ☒ NO

Step 5: DESCRIPTION OF PROJECT AND ESTIMATED DATE OF COMPLETION

DETACHED GARAGE WITH LIVING SPACE ABOVE

~ 10/2024

LOT SIZE: 50.97 (ACRES)

FRONT: ~ 700 FT.
(from center of road)

REAR: ~ 500 FT.

RIGHT SIDE: ~ 500 FT.

LEFT SIDE: 7 1000 FT.

- Copy must include: Site & design of building
- Height of building and landscaping design
- If in Design Control Overlay District: exterior design & exterior materials used

NAME _____

By signing below, I/We hereby certify that, to the best of my/our knowledge, all of the above is a true representation of the facts related to this proposed project. I/We also hereby request a Hearing before the Development Review Board if application is for a Conditional Use, Variance, Subdivision or Design Control.

Applicant Wells, Lindecker

Date: 10-16-2023

SIGNATURE OF ALL PROPERTY OWNERS REQUIRED (If additional lines required, a separate piece of paper can be added)

Property Owner Wall, L. Prhasa

Date: 10-16-2023

ZONING ADMINISTRATIVE OFFICER ACTION:

☐ APPROVED ☐ DENIED ☐ REFERRED TO DRB (DEVELOPMENT REVIEW BOARD)

***Note: All applications for CONDITIONAL USE, DESIGN CONTROL, SUBDIVISION, WAIVER and VARIANCE will automatically be DENIED pending a decision by the DRB at a hearing.**

ADMINISTRATIVE OFFICER'S SIGNATURE _____

DATE _____

DATE OF APPROVAL OR DENIAL BY DEVELOPMENT REVIEW BOARD:

DATE POSTED: _____ DATE WARNED: _____

HEARING DATE: _____ FINAL APPEAL DATE: _____

TH052-006.000

28.8 AcS

