

DANVILLE ZONING APPLICATION

FOR ADMINISTRATIVE USE ONLY

APPLICATION# 2023-74 DATE RECEIVED: 10-26-23 FEE PAID: _____

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): Kingdom Gravel & Aggregate

APPLICANT'S MAILING ADDRESS: Po Box 667 Barton VT 05822

CONTACT NUMBER: 800-525-9506 EMAIL: KGAAP@jpsicard.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): Kingdom Gravel & Aggregate

PROPERTY OWNER'S MAILING ADDRESS: Po Box 667 Barton VT 05822

CONTACT NUMBER: 800-525-9506 EMAIL: KGAAP@jpsicard.com

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

2033 us RT 2 West Danville VT

Parcel ID# _____ DEED: BOOK# _____ PAGE# _____

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

Step 5: DESCRIPTION OF PROJECT AND ESTIMATED DATE OF COMPLETION

64 square foot sign to replace 10 square foot sign

2 to 3 weeks

Step 6: LOT SIZE & SETBACKS: (Distance from new construction and lot lines)

LOT SIZE: _____ (ACRES)

LOT WIDTH: _____

FRONT: _____ FT.
(from center of road)

SETBACKS

REAR: _____ FT.

RIGHT SIDE: _____ FT.

LEFT SIDE: _____ FT.

Step 7: PLEASE ATTACH ONE COPY OF ALL SITE AND PLOT PLANS

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

Step 8: ADJOINING LAND OWNER INFORMATION. Provide NAME of ALL adjoining landowners. **ONLY** required if going to a DRB Hearing (Conditional Use, Variance, Subdivision, Waiver, and Design Control Applications)

NAME William Frye _____
Robert Labree _____
Fred Blair _____
Pana Catkins _____
Jonathan Nelson _____

Step 9: SIGNATURE

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 Jason L. Leland

Date: 10-26-23

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

Property Owner Jason Leland

Date: 10-26-23

FOR ADMINISTRATIVE USE ONLY

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.

Jason Leland
ADMINISTRATIVE OFFICER'S SIGNATURE

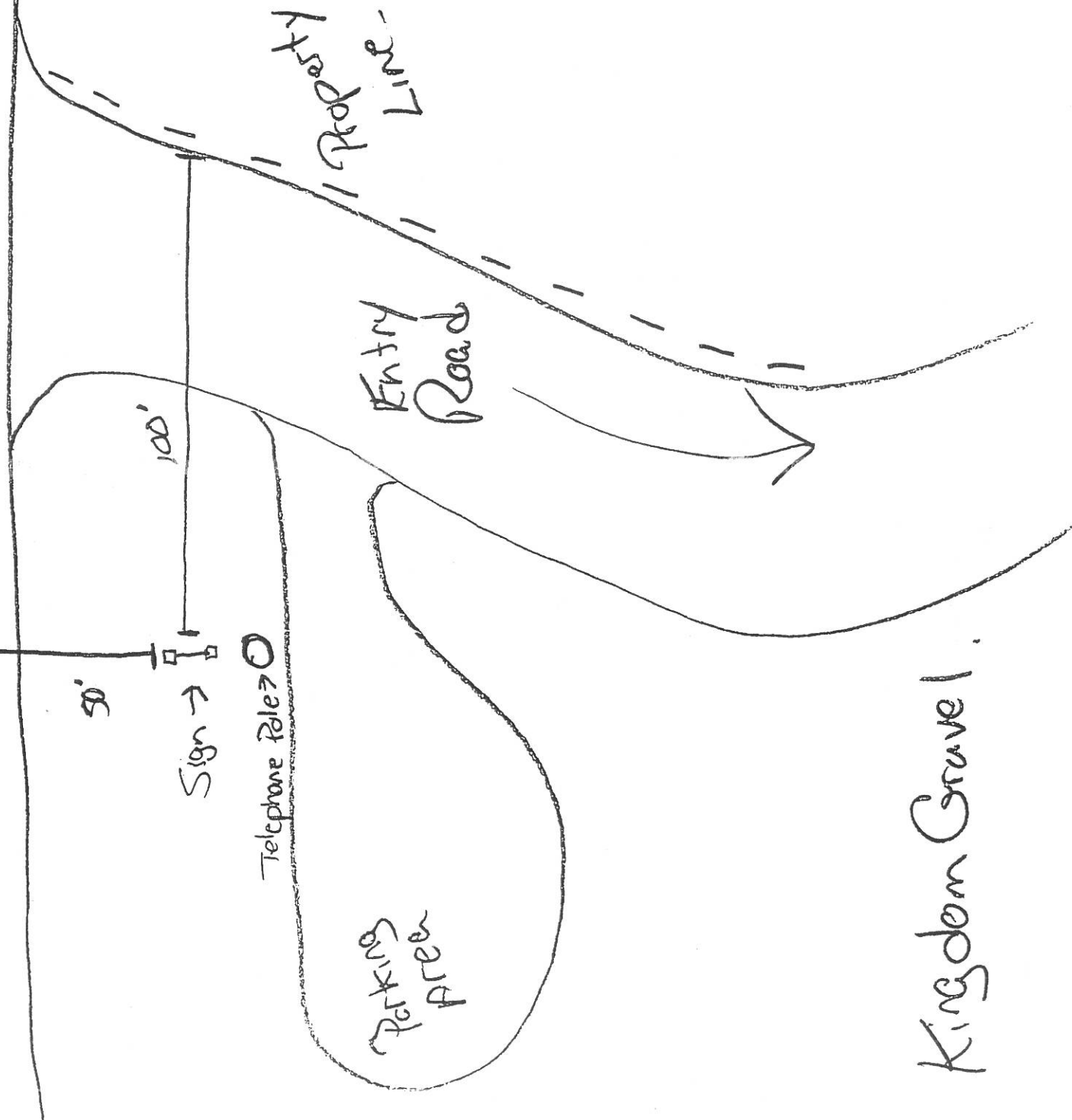
10-31-23
DATE

DATE OF APPROVAL OR DENIAL BY DEVELOPMENT REVIEW BOARD: _____

DATE POSTED: _____ DATE WARNED: _____

HEARING DATE: _____ FINAL APPEAL DATE: _____

US RT 2



Kingdom Gravel.