

DANVILLE ZONING APPLICATION

B:scell
WALDEA HEIGHTS
CK 11614
#35
6/18/24

FOR ADMINISTRATIVE USE ONLY

APPLICATION# 2024-43 DATE RECEIVED: 6-18-24 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): Jamie Milne

APPLICANT'S MAILING ADDRESS: P.O. Box 134 West Danville, VT 05813

CONTACT NUMBER: 802-249-7107 EMAIL: j.milne@milnefamily.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): Jamie Milne

PROPERTY OWNER'S MAILING ADDRESS: P.O. Box 134 West Danville, VT 05813

CONTACT NUMBER: 802-249-7107 EMAIL: jmilne@milnefamily.com

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

1361 Rt 15 West Danville, VT

Parcel ID# VT015-019.001 DEED: BOOK# 177 PAGE# 464

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

Step 5: DESCRIPTION OF PROJECT AND ESTIMATED DATE OF COMPLETION

Create an accessory apartment by dividing the dwelling into two apartments. The two bedroom apartment will utilize the existing kitchen and two bedrooms. A small half bath will be created by utilizing some of the living room space. The one bedroom apartment will have a small new kitchen retrofitted into a former bedroom space. The completion of this project is projected to be about 1-2 months after the Danville Zoning Application approval.

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

LOT SIZE: _____ (ACRES) LOT WIDTH: _____

FRONT: _____ FT. SETBACKS REAR: _____ FT.
(from center of road)

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 _____

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 James Blake Date: 6/13/2024

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

* Property Owner James Blake Date: 6/13/2024

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.

James Blake
ADMINISTRATIVE OFFICER'S SIGNATURE

6-18-24
DATE

DATE OF APPROVAL OR DENIAL BY DEVELOPMENT REVIEW BOARD: _____

DATE POSTED: _____ DATE WARNED: _____

HEARING DATE: _____ FINAL APPEAL DATE: _____

Thanks!

We will get you invoice paid.

Jamie

From: <>
Sent: Friday, June 14, 2024 10:57 AM
To:
Cc: cbissell <>
Subject: FW: Submission HQ4-CDQC-27SD5 Provided to VTANR

Application submitted (see below).

-----Original Message-----

From: "VTANR Online Services" <>
Sent: Friday, June 14, 2024 10:51am
To:
Subject: Submission HQ4-CDQC-27SD5 Provided to VTANR

Hello Patrick Larsen,

You have successfully submitted your **Wastewater System and Potable Water Supply Permit Application** form.

Your reference number for this submission is **HQ4-CDQC-27SD5**. At any time, you can review the status of this submission by logging into the system and clicking on the My Submissions link in the menu bar along the top right side of the screen. From the My Submissions page, you can review the details of this submission and track its status.

Please note that for submissions which have an associated fee, ANR staff will not begin processing the submission until all required processing fees are received. Paying any required fees electronically will help expedite the processing of your submission.

Thank you,



For assistance contact: <>

ANR/NRB Online Services Portal: <>