DANVILLE ZONING APPLICATION

FOR ADMINISTRATIVE USE ONLY		
APPLICATION# 2024-61 DATE RECEIVED: 9/17/24 FEE PAID: 4/17/24		
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		
Step 3: APPLICANT/PROPERTY OWNER: (PLEASE PRINT – if more than one PROPERTY OWNER a separate sheet can be attached)		
APPLICANT NAME(S): Noel D. Poel		
APPLICANT'S MAILING ADDRESS: 49 Brook feld Rd Seymon CA 0648 3		
APPLICANT'S MAILING ADDRESS: 49 Brook field Rd Sigmon C4 0648 3 CONTACT NUMBER: (203) 516-1603 EMAIL: noeldp1964@gmail.com		
Property Owner Name(s) MUST be the same as recorded on deed. If more than one, separate sheet can be added.		
PRUTERIY UWNER NANIE(O). Mucl & Fredda Peel		
PROPERTY OWNER'S MAILING ADDRESS: 49 Brook Fuld Rd. Synow Ct 06483		
CONTACT NUMBER: (203) 516-1603 EMAIL: noc/dp1964 @ gmail, com		
Step 4: PHYSICAL LOCATION OF PROJECT PROPERTY (911 ADDRESS):		
828 Channel Dain West Danville, Ut 05828		
Parcel ID#		
IS PROPERTY ON TOWN WATER AND/OR SEWER?		
Step 5: DESCRIPTION OF PROJECT AND ESTIMATED, DATE OF COMPLETION Enlargement of loft bedroom, Front Porch 12/31/2024 34.5' x 6'1		
12/31/2024 34.5'x 6'1		

Step 6: LOT SIZE & SETBACKS: (Distance from new construction and lot lines)			
LOT SIZE:(ACRES)	LOT WIDTH:/80	/	
FRONT: /OO FT.	REAR: //	FT.	
RIGHT SIDE: FT.	LEFT SIDE: 70	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			
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ZONING ADMINISTRATIVE OFFICER ACTION: □ APPROVED □ DENIED □ REFERRED TO DRB (DEVEL OPMENT REVIEW BOARD)			
□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:			



