Exhibit A1

TOWN OF WATERBURY ZONING PERMIT APPLICATION

Date created: Oct-Nov 2012 / Revised: July 2019

Date: 04.25.2022 Application #: 048-22 Fees Paid: 150 + \$15 recording fee = 165 -Parcel ID #: 195-0230 Tax Map #: ___

Please provide all of the information requested in this application.

Read the Zoning Regulations and familiarize yourself with the requirements. Failure to provide all the required information will delay the process of this application. Based upon the nature of the project you may need to submit additional information. For instructions on how to fill out this form please refer to the Zoning Permit Application Instructions & Fee Schedule available on the municipal website or at the municipal offices. Submit one copy of the completed application and a check payable to the Town of Waterbury according to the zoning fee schedule. For questions about the permit process, please contact the Zoning Administrator at 802-244-1018.

please contact the Zoning Administrator at 302 244 2000	
CONTACT INFORMATION	PROPERTY OWNER (if different from Applicant)
APPLICANT	
Name: Child Russell	Name:
Mailing Address: P.s. Box 354	Mailing Address:
Waterbury, UT. 05676	
Home Phone: \\ \\ \2. 244. 5356	Home Phone:
Work/Cell Phone: 802. 244.7145	Work/Cell Phone:
	Email:
PROJECT DESCRIPTION (primary n2elv	irae grail Com CHECK ALL THAT APPLY:
Physical location of project (E911 address): 230 Russell	
	and the state of t
Lot size: Garas Zoning District: Route 100 W	Multi-Family Dwelling
Lot size: Garas Zoning District: Koute 100	Commercial / Industrial Building
Existing Use: Proposed Use: 34 x / 9	Residential Building Addition
Brief description of project:	□ Comm./ Industrial Building Addition
is built storage shed	Accessory Structure (garage, shed)
	□ Porch / Deck / Fence / Pool / Ramp
Cost of project: \$20; Coc Estimated start date:	Development in SFHA (including repairs and renovation)
Water system: Waste water system:	Other
PROPOSED	USE
Square footage Height: Square footage: 334	Height: hEstablish new use Change existing use light storey
Number of bedrooms/baths: Number of bedroom	ns/bath: Lexpand existing use
C. Live en acc	I I'MDUIIG CHIDUIN
# Of parking spaces.	OTHER
Detpacks: J. O	rear: 40 □ Subdivision (# of Lots:)
sides: sides: sides:	Boundary Line Adjustment (BLA)
ADDITIONAL MUNICIPAL PERMITS REQUI	IRED: □ Planned Unit Development (PUD)
Curb Cut / Access permit E911 Address Request	□ Parking Lot
□ Water & Sewer Allocation □ none of the above	□ Soil/sand/gravel/mineral extraction
[Additional State Permits may also be rec	quired] Other
	PAGE 1 of 2

Exhibit A2	
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and the same of th	
The undersigned hereby applies for a Zoning Permit for the basis of the representations made herein all of which Applicant Signature	th the applicant swears to be complete and true. date 4. 35. 22
La la D	W ac 25
Property Owner Signature	date
ONTACT Zoning Administrator Phone: (802) 244-1018 Mailing Address: Waterbury Municipal Offices, 28 North I Municipal Website: www.waterburyvt.com	Main Street, Suite 1, Waterbury, VT 05676
Zoning District/Overlay: RTE 100 OFFICE USE ONL	Y REVIEW/APPLICATIONS:
Zoning District/Overlay:DRB Public Warning Required: ✓ Yes	1/0 PM 111
DDD Defermal leaved (offenting 15 days later):	□ Variance
DRB Mtg Date: JUNE 1, 2022 Decision Date:	Subdivision:
Date Permit issued (effective 16-days later): Final Plat due (for Subdivision only):	Overlay:
Remarks & Conditions:	□ Other
Authorized signature: Date:	□ n/a
Authorized signature:Date:	PAGE 2 o

Please include a sketch of your project, drawn to scale, with all required measurements - see Zoning

Permit Application Instructions. You may use the space below or attach separate sheets. For plans larger than 11"x17" please provide a digital copy (pdf. file format) in addition to a paper copy.

SKETCH PLAN

Exhibit A3

TOWN OF WATERBURY CONDITIONAL USE INFORMATION

Date: _____Application #: ____
Fees Paid: ____(\$15 recording fee already paid)
Parcel ID #: ____
Tax Map #: ____

This Conditional Use (and Setback Waiver) information sheet supplements the Zoning Permit application. Please provide all of

the information requested on each form. Read the Zoning Regulations and familiarize yourself with the requirements. Failure to provide all the required information will delay the process. Submit one copy of the completed forms and a check payable to the *Town of Waterbury* according to the zoning fee schedule. For questions about the permit process, please contact the Zoning Administrator at 802-244-1018.

PI Br	roject description of project:
C	ONDITIONAL USE CRITERIA
Ple	ease respond to the following; you may answer on a separate sheet and attach additional pages and supporting materials:
1.	Describe how the proposed use will not have an undue adverse impact on the capacity of existing or planned community facilities to accommodate it (including roads and highways, municipal water or sewer systems, school system, fire protection services): Aside from united fire protection (as needed) No other muncipal services will be impacted. Please note, a pond is located in close proximity to the main Describe how the proposed use will not have an undue adverse impact on the character of the area affected as defined by the Municipal Plan and the zoning district in which the proposed project is located: No undue adverse impacts are expected
3.	Describe how the proposed use will not violate any municipal bylaws and ordinances in effect: No violations of municipal bylaws/ordinances are expected
4.	dust smoke, odor, noise or in brations
5.	The court of a sure of the sur

CONTACT

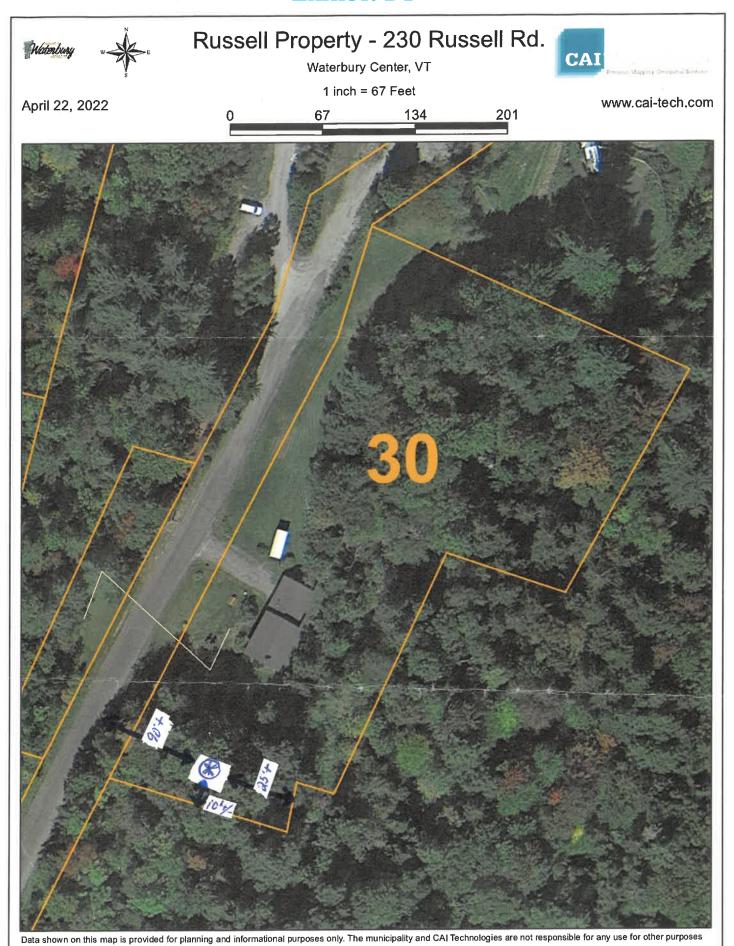
Zoning Administrator Phone: (802) 244-1018

Not applicable for this project

Mailing Address: Waterbury Municipal Offices, 28 North Main Street, Waterbury, VT 05676

Municipal Website: www.waterburyvt.com

Exhibit B1



or misuse or misrepresentation of this map.

