

TOWN OF RIPTON

Post Office Box 10
Ripton, Vermont 05766

APPLICATION FOR ADMINISTRATIVE HEARING (Planning Commission/Zoning Board of Adjustment/Historic District Commission)

Applicant's name(s) and mailing address: _____

Telephone: Home: _____ Work: _____

Owner's name(s) and mailing address (if different from applicant's): _____

Telephone: Home: _____ Work: _____

E-911 locatable address: _____

Tax map identification: Map sheet # _____ Map block # _____ Parcel ID# _____

Type of hearing requested (please check one):

- Appeal of a permitting decision of the Administrative Officer, in accordance with the provisions of 24 VSA 117 §4464; reason for appeal: _____

- Application for conditional use permit, in accordance with the provisions of 24 VSA 117 §4407(2); proposed conditional use: _____

- Application for a variance to the requirements of the Ripton UD Bylaw, in accordance with the provisions of 24 VSA 117 §4468; applicable section and reason for variance: _____

- Application for subdivision approval, in accordance with the provisions of 24 VSA 117 §§4413 through 4421.
- Application for PRD/PUD site plan approval, in accordance with the provisions of 24 VSA 117 §§4407(3), (5) and (12).
- Application for Historic District site plan approval, in accordance with the provisions of §1008 of the Ripton UD Bylaw.

The applicant (or owner) should submit as attachments to this application any site plans, structural floor plan and elevation drawings, landscaping diagrams, traffic circulation diagrams, local land use maps and any other data or information that may be required to fully advise the Board's/Commission's deliberations and decision.

Signature of applicant: _____ Date: _____

Signature of landowner: _____ Date: _____
(if other than applicant)

Fee paid: _____ Hearing # _____

Form RZB-5 (9/25/12)

Administrative Officer: E. W. Hanson - (802) 453-3785
santorini@gmavt.net