City of Vergennes Application to the Development Review Board

Parcel I.D. Number:		
Address of property under review:		
Property Owner:		Phone #:
Mailing Address:		
City:	State:Zip:_	
Applicant (If different):		Phone #:
Mailing Address:		
City:	State:Zip:_	
Property Owner Signature:	Da	vate:/
Applicant Signature:(If not owner, prop	Date overty owner's information and signature required)	ate:/
Application Type: (check one)		
() Variance (Must meet the conditions	of Section 605 of the zoning and subdivision regulations)	
•	ministrative officer (Must meet the conditions of A	Article VI the zoning and subdivision regulations)
	e conditions of Article VII of the zoning and subdivision reg	
	conditions of Article VIII of the zoning and subdivision reg	
	ions of Article IX of the zoning and subdivision regulations	
() Other: (Enter applicable article/section	on of the zoning and subdivision regulations)	
Reason for application or appeal: _		
The property owner or applicant must submit with th information and data required to advise the Board ful	nis application the applicable fee together with any plans, dia illy with reference to the application or appeal.	agrams, sketches, maps, and/or all additional pertinent
	Administrator / Board Use On	dy
Zoning District		
Application No:	Fee Paid: \$	Date:/
Public Notice Date:/_ Final Hearing Date:/_ Date of Decision:/_	/	