

Zoning Permit Application Town of Westmoreland		Date	Map & Lot		Zone	
Name of Applicant			Phone			
Applicant Mailing Address			Email			
Property Owner (if different)			Phone			
Property Owner Mailing Address			Email			
Property Location						
Wetlands/Watercourses on Property		No	Yes	Property in Current Use		No Yes
Describe Wetlands						
Zoning Permit Requested For	New	Alteration	Variance	Change of Use	Special Exception	Other
Describe						
Permit Fee \$		Cash	Check/Number			

*Attach diagram or blueprints showing actual shape, dimensions, and location of: the lot to be used, all required setbacks, existing buildings upon it, alterations proposed for existing buildings, and proposed new buildings. State existing and intended use of buildings, lots, or parts thereof; also note any other pertinent information concerning the property.

I/we understand that if any of the submission requirements are incomplete, Application may not be accepted or acted upon until all required information has been submitted. The owner(s), by the filing of this Application, hereby give permission for purposes of consideration of this Application for any official and/or representative the Town of Westmoreland may authorize, to enter upon the subject property at all reasonable times for the purpose of such examinations, surveys, tests and inspections as may be appropriate; and release any claim or right we may now or hereafter possess against any of the above as a result of any examinations, surveys, tests and inspections conducted on the subject property in connection with this application.

I/we further agree to pay all fees as required by the pertinent Westmoreland regulations. I/we understand that payment of such fees is a condition precedent to approval and that a deposit may be required at any time during the review process.

I/we acknowledge I/we are aware of pertinent ordinances, regulations, and laws related to this project and to the best of my/our knowledge, all the information contained in the Application is true and accurate.

Attest: _____ Date: _____
Signature of Applicant(s)

