

Bennington, VT Town Clerk's Office

,20 at

o'clock minutes M

book _____ on page _____ of

Records

Attest. _____
Town Clerk

APPLICATION FOR ZONING PERMIT

Village of Old Bennington

Application #

Fee Paid

Date Received

Zone

Date Deemed
Complete

NAME OF APPLICANT Myers Prouty Children's Campuses Inc. DBA MPCC Shaftsbury Campus

Address: PO Box 153 Shaftsbury, Vt. 05262

Email: jmyers@myersproutycc.org

Phone: 802-688-9570

NAME OF PROPERTY OWNER (If different from above)

Address: 1 Monument Circle, Old Bennington

LOCATION OF PROPERTY 1 Monument Circle Old Bennington

PARCEL ID. (Tax Bill):

LOT SIZE .58 acres Frontage on Public Road 267 ft.

Public Water Public Sewer

TYPE OF USE: Residential Business Agricultural

Institutional Subdivision

Sign Change of Use New Construction

Addition Alteration Amendment

IF APPLICATION IS FOR CHANGE OF USE: Existing Use N/A

Proposed Use:

(If business or institutional use, attach description)

IF APPLICATION IS FOR NEW CONSTRUCTION, ADDITION, ALTERATION OR AMENDMENT: Describe

Replace existing wood picket fence please see attached letter and photos

BUILDING Length _____ ft. Width _____ ft. Height _____ ft. No. of Stories _____

SETBACK FROM PROPERTY LINES: Front 24 ft. Rear _____ ft. Side _____ ft. Side _____ ft.

COST OF PROJECT \$5000 Approx (Include land preparation and all sub-contractors' costs. Attach builder's estimate, if available). Appropriate fee (see fee schedule) must accompany application.

I understand I must secure a certificate of use/occupancy before using or occupying this structure.

I hereby certify that all statements contained herein and in all accompanying documents are true and correct, to the best of my knowledge.

Date

Applicant's Signature

ZONING ADMINISTRATOR'S REPORT (Office Use Only)

ACTION: To PC _____ To ZBA _____ Minor Permit _____ Date _____

Approved Approved with conditions Denied

Date

CONDITIONS/COMMENTS _____

Start Date _____ Completion Date _____

ZONING ADMINISTRATOR