



TOWN OF FAIRFIELD VT

✉ zoning@fairfieldvermont.us

☎ 802-827-3261 x3

📍 PO Box 5
Fairfield VT 05455

Zoning Certificate of Occupancy/Compliance Application

Owner / Applicant: _____

Mailing Address: _____

Phone Number: _____ Email: _____

Physical Address of Parcel: _____

Parcel ID: _____ Span: _____

Requesting

☐ **Certificate of Occupancy \$70.00**

Certificate of Occupancy may require proof of the completed RBES (Residential Building Energy Standards) or CBES (Commercial Building Energy Standards) form as pursuant Title 24 § 4449.

☐ **Certificate of Compliance (major) \$70.00 (NEXT PAGE REQUIRED)**

Recommended for property sales. The Planning and Zoning Department completes file research and issues a Compliance Letter to document findings. **Please make appointment with Zoning Administrator to go over property information. Notary signature required.** Site inspection may be necessary.

☐ **Certificate of Compliance (general) \$40.00**

This is for shed, pools, decks, porches, etc. To maintain up to date records of small permitted buildings and to ensure that each permit was completed to the submitted and approved specifications listed on the issued permit. Site inspection may be necessary.

Please submit this application and payment to the Zoning Office

Questions? Please contact the Zoning Administrator at zoning@fairfieldvermont.us



TOWN OF FAIRFIELD, VERMONT
ZONING OFFICE

PROPERTY ZONING CERTIFICATION STATEMENT

Property Address: _____

Parcel/Span Number: _____

I, the undersigned property owner, hereby certify that I have reviewed all property information, records, and known improvements associated with the above-referenced property with the Town of Fairfield Zoning Administrator.

I further affirm and certify that, to the best of my knowledge and belief, there have been no additions, alterations, changes, or updates made to the property that have not been properly disclosed to and recorded with the Town of Fairfield Zoning Office. This includes, but is not limited to, structural changes, accessory buildings, land use changes, or any other modifications requiring zoning review or approval under the Town of Fairfield Zoning Bylaws.

I understand that providing false or incomplete information may result in penalties or enforcement actions in accordance with applicable zoning regulations, including those set forth by the Town of Fairfield and the State of Vermont.

By signing below, I acknowledge that this statement is true, complete, and accurate.

Property Owner Name (Printed): _____

Property Owner Signature: _____

Zoning Administrator Signature: _____

Date: _____

STATE OF VERMONT

COUNTY OF FRANKLIN

On this ____ day of _____, 20____, before me, the undersigned Notary Public, personally appeared _____, known to me or satisfactorily proven to be the person whose name is subscribed to the foregoing instrument, and acknowledged that they executed the same for the purposes therein contained.

In witness whereof, I hereunto set my hand and official seal.

Notary Public Signature: _____

Printed Name of Notary Public: _____

My Commission Expires: _____

Notary Seal: