

**TOWN OF WOODFORD  
1391 VT ROUTE 9  
WOODFORD VT. 05201**

Phone: 802-442-4895

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**Application fee \$75.00**

Zoning Permit Application # \_\_\_\_\_ Date \_\_\_\_\_ Parcel # \_\_\_\_\_

Applicant \_\_\_\_\_ Telephone # \_\_\_\_\_

Address \_\_\_\_\_

Street

City

State

Zip

Local Address (where work is to be done) \_\_\_\_\_

Landowner (if different from applicant) \_\_\_\_\_ Telephone \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip

Nature of Work: New Construction (size) \_\_\_\_\_ Addition (size) \_\_\_\_\_

Existing Use \_\_\_\_\_ Proposed Use \_\_\_\_\_

Lot Size \_\_\_\_\_ Frontage on Public Road \_\_\_\_\_ Ft

Building Length \_\_\_\_\_ Width \_\_\_\_\_ Height \_\_\_\_\_ No. of Stories \_\_\_\_\_

Setbacks: Road Right of Way \_\_\_\_\_ Rear \_\_\_\_\_ Side #1 \_\_\_\_\_ Side #2 \_\_\_\_\_

Type of Water System \_\_\_\_\_ Type of Sewage System \_\_\_\_\_

**A general plot plan showing the location of the property, buildings, work areas and setbacks must be attached to this application.**

Abutting Landowners- Name & Address (**must be filled out**)

Abutting Landowner #1 \_\_\_\_\_

Abutting Landowner #2 \_\_\_\_\_

Abutting Landowner #3 \_\_\_\_\_

Comments: \_\_\_\_\_

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For use by administrative officer only

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Referred to Zoning Board of Adjustment \_\_\_\_\_ Date \_\_\_\_\_

Reason for Denial or Referral: \_\_\_\_\_

Comments: \_\_\_\_\_

Zoning Administrator signature \_\_\_\_\_ Date \_\_\_\_\_

Zoning Board of Adjustment signature \_\_\_\_\_ Date \_\_\_\_\_

Planning Commission signature \_\_\_\_\_ Date \_\_\_\_\_

Permit Effective Date (this date is 15 days following approval) \_\_\_\_\_

**An interested person may appeal any decision by the administrative officer of the Zoning Board of Adjustment within 15 days of the date of the decision. This permit shall not take effect until the time for such appeal has passed.**