

# PLANNING AND ZONING APPLICATION

Town of Essex, Community Development Department  
81 Main Street, Essex Jct., VT 05452 (802) 878-1343  
www.essex.org

## 1. PROJECT REVIEW INFORMATION

The undersigned hereby applies to appear before the Planning Commission and / or Zoning Board of Adjustment for the following:

### OFFICE USE ONLY

	Fee Paid	Date
___ (ZBA) CONDITIONAL USE	\$ _____	__ / __ / __
___ (ZBA) HOME OCCUPATION	\$ _____	__ / __ / __
___ (ZBA) VARIANCE	\$ _____	__ / __ / __
___ (PC) SITE PLAN	\$ _____	__ / __ / __
___ (PC) SITE PLAN AMENDMENT	\$ _____	__ / __ / __
___ (PC) CONSENT AGENDA	\$ _____	__ / __ / __
___ (PC) SUBDIVISION <input type="checkbox"/> SKETCH <input type="checkbox"/> PRELIM <input type="checkbox"/> FINAL	\$ _____	__ / __ / __
___ (PC) FINAL PLAN AMENDMENT	\$ _____	__ / __ / __
___ OTHER _____	\$ _____	__ / __ / __

## 2. APPLICANT / LANDOWNER INFORMATION

**Applicant(s) Name(s):** \_\_\_\_\_

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

Phone (office): \_\_\_\_\_ Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

**Landowner Name:** \_\_\_\_\_

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

Phone (office): \_\_\_\_\_ Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

## 3. CONSULTANT INFORMATION

Civil Engineer or Certified Land Surveyor

Other (Architect / Hydrologist)

Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Phone: (office) \_\_\_\_\_ (home) \_\_\_\_\_  
(cell) \_\_\_\_\_ (fax) \_\_\_\_\_

Phone: (office) \_\_\_\_\_ (home) \_\_\_\_\_  
(cell) \_\_\_\_\_ (fax) \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

**PRIMARY CONTACT PERSON FOR THIS APPLICATION** \_\_\_\_\_

**4. PROJECT INFORMATION**

**PROVIDE A DETAILED DESCRIPTION WITH THIS APPLICATION**

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

TAX MAP \_\_\_\_\_ TAX PARCEL \_\_\_\_\_ TAX LOT \_\_\_\_\_ ZONING DISTRICT \_\_\_\_\_  
(found in Town Assessor's Office)

LAND RECORDS VOLUME \_\_\_\_\_ , PAGE \_\_\_\_\_  
(found in Town Clerk's Office)

Type of Use: \_\_\_\_\_ Total Acreage of Parcel: \_\_\_\_\_ Proposed acreage: \_\_\_\_\_

Number of units / lots (include **all** subdivided lots within the last ten years, including lots to be retained): \_\_\_\_\_ Square feet: \_\_\_\_\_

**5. SUBMISSION REQUIREMENTS**

One copy of a detailed written description to include answers to criteria in Regulations and Checklist specific to application; Nine (9) sets of plans; 3 full size sets and 6 -11x17 size, **plus email .pdf's of the plans, and narrative in Word to *jbooker@essex.org* and *skelley@essex.org***; an abutter's list including **3 sets of mailing labels**. Your application(s) will not be set for a hearing date until all required information / documentation / plans / abutters / fees are submitted as a package and determined **COMPLETE** by Staff. Outstanding issues may delay an appearance before the Board or Commission.

Refer to fee schedule to determine the fee for application submittal. Make checks payable to the Town of Essex.

**6. SIGNATURES**

I / We have read and understand this application. All information in this application is true and correct to the best of my / our knowledge.

\_\_\_\_\_  
**Land Owner Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Applicant / Agent Signature**

\_\_\_\_\_  
**Date**