

Appeal Period Expires 3/9/24
Zoning District L-1



Town of Georgia
Application for Zoning Permit
& Building Permit

Application Date 2/23/24
Permit Number ZA-003-24

- ⇒ For any change of use on State Highways (Route 7 & 104A) contact VTRANS
⇒ Post **Permit Poster** so it is visible to the road immediately as the Permit is appealable within 15 days of issuance.
⇒ Complete a Certificate of Occupancy application upon completion of project. Application is available on the website at townofgeorgia.com
⇒ Provide a diagram showing the proposed project. Include easements, well location, septic location and setbacks from the property line.
⇒ Property information is available on the town website using the Georgia VT Parcel Map

A

Parcel Number: 105530060
Property Address (E911): 2044 Georgia Shore rd.
Applicant Name: Kyle Haggerty
Applicant Address: 2044 Georgia Shore rd.
Applicant Phone: [REDACTED] Applicant Email: [REDACTED]
Owners Name (if different): _____

Property Owner Authorization: *The undersigned property owner hereby certifies that the information submitted in this application regarding the property line is true, accurate, and complete. The Applicant has full authority to request approval for the proposed use of the property and any proposed structure.*

Date: 2/16/24 Owner's Signature: [REDACTED]

B

Proposed Construction

Dimensions: (1) L 0 x W 0 x H 0 (2) L 0 x W 0 x H 0 Total ft² 0
of floors: 0 # of Bedrooms 0 # of Bathrooms 0

C

Property Information

Lot Size 1.4 acres Lot road frontage 130'
Proposed Setbacks (in feet)
Center of Road 31' Right Side 100' Left Side 47' Rear 142'

D

Previous Permits / Subdivision Name / Driveway Permit / DRB Application

none / _____
_____ / _____

E

Septic Information: *Applicants should visit the Agency of Natural Resources Department of Environmental Conservation to determine if a wastewater and Potable Water Supply Permit is required in accordance with 10 V.S.A. Chapter 64.*

Website: <https://dec.vermont.gov/water/forms/ww-systems-permits>

☒ Changes are not proposed to the building or to the use which will increase the amount of wastewater disposal. (i.e. adding bedroom or change of use)

☐ Wastewater & Potable Supply Permit is required. State Permit # _____

F

VT Building Energy Standards Certificate (RBES): *The Vermont Residential Building Energy Standard (RBES) - 30 V.S.A. § 51 affects all new homes built after July 1, 1998. It is the energy code for all residential buildings 3 stories or less above grade in Vermont. RBES Disclosure Statement must be filled out and recorded with the town prior to the issuance of a Certificate of Occupancy. Applicant must certify the following:*

☒ Structure which is subject of this application DOES NOT require an RBES Certificate

☐ Structure which is subject of this application DOES require an RBES Certificate

G

Check box(es) which describe proposed use or construction (circle choice in parenthesis)

N = New A = Addition R = Remodel

| Residential: | N | A | R |
|--|--------------------------|--------------------------|-------------------------------------|
| Single Family | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Two-family (Duplex) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Multi-family | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Condominium / Townhouse | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Manufactured Home | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Seasonal Camp | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ADU (accessory dwelling unit) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Inclusions or Additions: | | | |
| Garage <input type="radio"/> attached <input type="radio"/> detached | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Addition | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Porch <input type="radio"/> enclosed <input type="radio"/> open | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Deck / Patio | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Pool <input type="radio"/> in ground <input type="radio"/> above | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Shed / Play House / Coop | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Barn <input type="radio"/> residential <input type="radio"/> agriculture | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Greenhouse <input type="radio"/> residential <input type="radio"/> agriculture | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fence (< 5' in height no permit required) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Non-Residential: | | | |
| Commercial / Industrial | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sign | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other: | check if needed | | |
| Change in Use | <input type="checkbox"/> | | |
| Home Occupation | <input type="checkbox"/> | | |
| Permit Renewal | <input type="checkbox"/> | | |
| Appeal | <input type="checkbox"/> | | |
| Variance / Waiver | <input type="checkbox"/> | | |

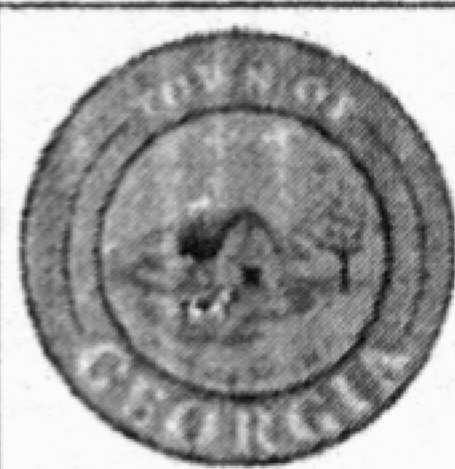
H

Please check the appropriate box for the following:

| Additional Property Information | Yes | No |
|---|-------------------------------------|-------------------------------------|
| Is there a stream or wetland on property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Is the property in a Special Flood Hazard Area? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Is the property in an L1 zone on Lake Champlain? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Is the property in the South Village? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Project involve work in town right of way? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Project involve a change in the # of bedrooms? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Project involve demolition / renovation? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Have you attached a drawing of project? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Is this a primary residence? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Is there an HOA (Home Owners Association)? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Property have a E911 sign at end of driveway? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Is there an increase in impervious surface? (includes roof, deck, porch, pavement, patio etc.) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes total square feet _____ ft ² | | |

Property Owner Acknowledgement: *The undersigned applicant hereby affirms that the information provided in this application is true, accurate, and complete. I understand if this application is approved, I must post the building poster provided on the property in public view and allow a 15 day appeal period before work begins. I understand Vermont law allows 30 days to find this application complete. I understand that my signature on this application constitutes permission for on-site inspection of the property described on this application form under Article 3 of the Georgia Development Regulations.*

Applicant Signature: [REDACTED] Date 2/16/24 Co-Applicant Signature: _____ Date ____/____/____



OFFICIAL USE ONLY — ZONING ADMINISTRATOR ACTION — OFFICIAL USE ONLY

Date Application Received: 2/23/24 Zoning District: L-1

Project Description: Changing roof line / truss

Additional Action Needed:

Variance / Waiver: _____

Appeal: _____

Conditional Use Res: _____

Conditional Use Com: _____

Concept / Sketch Plan: _____

Site Plan: _____

BLA: _____

Amend / Renew: _____

Meeting date with DRB: ____/____/____

Meeting date with DRB: ____/____/____

Meeting date with DRB: ____/____/____

Meeting date with DRB: ____/____/____

Meeting date with DRB: ____/____/____

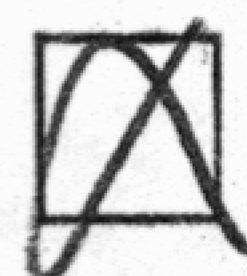
Meeting date with DRB: ____/____/____

Meeting date with DRB: ____/____/____

Meeting date with DRB: ____/____/____

Final Zoning Administrator Action

ZONING PERMIT



Approved

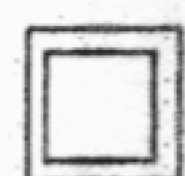
Date: 2/23/24

Zoning Administrator: _____

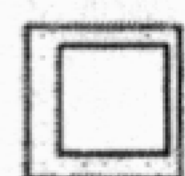
Permit EFFECTIVE date: 3/10/24

Permit EXPIRATION date: 2/23/24

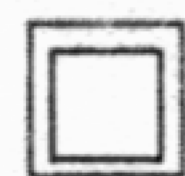
CONDITIONS of Approval:



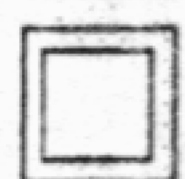
RBES Required



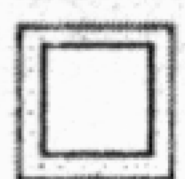
Certificate of Occupancy Required



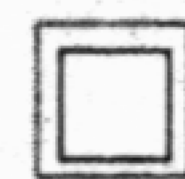
VTRANS Permit Required



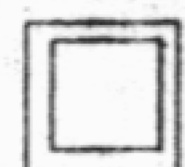
Driveway Permit



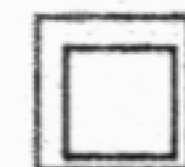
ROW Permit



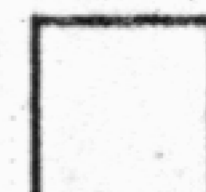
Class 4 Road Agreement



Other: _____



E911 Sign



Denied

Date: ____/____/____

Zoning Administrator: _____

Reason for Denial: _____

Fees

Permit Fee: \$ 100

Recording Fee: \$ 60

RBES Record: \$ _____

VTRANS Record: \$ _____

Driveway Permit: \$ _____

ROW Permit: \$ _____

Road Inspection: \$ _____

Cert. of Occupancy: \$ 50

Cert of Occ Record: \$ _____

Impact Town: \$ _____

Impact School: \$ _____

Other: \$ _____

Total Fees Zone: \$ 210

Total Record: \$ 60

Total Highway: \$ _____

Total Impact Town: \$ _____

Total Permit Fees: \$ 210

Notice of Appeal Rights: Any interested person may appeal this decision by filing a written Notice of Appeal with the Zoning Administrator or DRB Clerk within 15 days of the date of this decision. (Title 24 VSA ch. 117 Section 4465)

This permit does not authorize commencement of any development activity approved by the permit until the permit takes effect as set forth above.

Site modifications and improvements made prior to this permit becoming effective may be subject to removal and site restoration if a timely appeal is commenced.

Expiration: This permit expires one year from the date of issue or date listed at top of permit and may be extended one additional year upon application.

Conditions: Conditions imposed by the Zoning Administrator, Planning Commission, DRB, or Selectboard are hereby incorporated into this permit and are binding on the permittee.

Note: The applicant retains the obligation to identify, apply for, and obtain relevant state permits for this project. Call (802) 477-2241 to speak with a regional Permit Specialist.

Permit #: _____ E911 Address: _____

Applicant Name: _____

Show and label property lines, driveway, septic, well, easements, road frontage, distance from front, rear and sides of property line. Show existing structures and new structures and label appropriately.

Example project layout on back of page.

