

APPLICATION FOR CERTIFICATE OF OCCUPANCY
TOWN OF DERBY
124 Main St, Derby, VT 05829

Property Owners Name: _____ Daytime Phone: (____) _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

E-911 Locatable Address: _____

Property Tax ID #: _____ Zoning District: _____

I, _____, certify that this request for a FINAL Certificate of Occupancy is for a change in tenancy only. The proposed tenant is _____

Owner's Signature: _____ Date: _____

I, _____, certify that all construction, landscaping, lighting, etc... has been completed and all conditions have been complied with in regards to Permit # _____ which was issued on _____ and I hereby request that a FINAL Certificate of Occupancy be issued.

Owner's Signature: _____ Date: _____

I, _____, certify that the property is ready of occupancy for the use approved under Permit # _____ which was issued on _____. However the following items remain to be completed in order to be in full compliance with the permit:

I hereby request that a TEMPORARY Certificate of Occupancy be issued for _____ months, during which time I will bring the property in full compliance.

Owner's Signature: _____ Date: _____

For Administrative Use Only – 7/08

Application Number: _____ Submitted on: _____ Fee: _____

Based upon the representations contained herein this Certificate of Occupancy is hereby -

Granted: _____ Denied: _____ By: _____

Administrative Officer

Reasons for Denial or Conditions: _____

A copy of the complete permit is on file in the Zoning Administrator's Office.

APPLICATION FEES (effective July 28, 2008)
(ALL FEES ARE NONREFUNDABLE)

Certificate of Occupancy	\$100.00
Temporary Certificate of Occupancy	\$ 50.00 + \$10.00 per month (up to 12 months)

It is **HIGHLY RECOMMENDED** that applicants discuss the application and requirements with the Zoning Administrator prior to submission to ensure that all necessary information is submitted and to ensure efficient and timely processing of the application. The Zoning Office phone number is (802) 766-2017.

An interested person may appeal any decision by the Administrative Officer to the Zoning Board of Adjustment in accordance with 24 VSA, Chapter 117, §4465, in writing, within 15 days of the date of such decision. The fee is \$200.

An interested person who has participated in the municipal regulatory proceeding may appeal the decision rendered in that proceeding by the appropriate municipal panel (Planning Commission or Zoning Board of Adjustment) to Environmental Court in Accordance with 24 VSA, Chapter 117, §4471, in writing, within 30 days of the date of such decision. The fee is \$250.

If you fail to appeal a decision, your right to challenge the decision at some future time may be lost because you waited to long. You will be bound by the decision, pursuant to 24 V.S.A. §4472(d).

THIS IS A LOCAL PERMIT APPLICATION ONLY. Other permits may be NECESSARY. To determine if State permits are required, contact the State Regional Permit Specialist at (802) 476-0195 and the State Dept. of Labor and Industry at (802) 828-4000.

Contact the Village of Derby Line (802) 873-3420 or Village of Derby Center (802) 766-2844 if municipal water or sewer is required.

Any project requiring new entry onto Town roads or alters the public right of way requires an Access Permit issued by the Town Road Commissioner, application forms are available from the Zoning Administrator and may be submitted in conjunction with the zoning permit application.

ACKNOWLEDGMENT OF RESPONSIBILITY

I hereby affirm that I am the fee title owner or the owner's agent* of the property for which this application has been made. I am the party whom the Town should contact regarding any matter pertaining to this application and it is my responsibility to keep myself informed of the progress of the application.

I further understand that additional information such as a survey of the property, traffic analysis, or expert testimony may be required for analysis of the application, and that upon my written authorization, fees for such additional information will be my responsibility.

I agree to allow Town personnel access to the property to review all aspects of this application and for tax assessment purposes.

Property Owner's Signature: _____

*NOTE: Written documentation must be submitted and approved by the Zoning Administrator proving that the agent is legally authorized to act on the property owner's behalf.