TOWN OF SHARON, VERMONT

FLOOD HAZARD AREA PERMIT APPLICATION

Parcel ID#	Permit No
Applicant Name:	Phone Number:
Property Address:	
Property Owner (if not same as applicant):	
Owner's Address:	

1. DESCRIBE WHAT YOU ARE APPLYING FOR. Include dimensions of any new structures, additions to structures, or structures to be repaired or improved. Use a separate sheet if needed.

2. PROVIDE A SKETCH OF WHAT YOU ARE APPLYING FOR ON AK SEPARATE SHEET. Draw a lot outline and show all existing and proposed structures, roads, driveways, parking areas, wells, septic systems, bridges, and culverts within that lot.

PROPERTY OWNER: The undersigned property owner hereby certifies that all information submitted on or with this application is true and accurate, consents to its submission, and understands that if the application is approved, the permit and any attached conditions will be binding on the property. Further, the undersigned authorizes the Administrative Officer access, at reasonable times, to the property covered by the permit issued under this application, for the purposes of ascertaining compliance with the permit.

Property Owner's Signature

APPLICANT (if not the property owner): The undersigned applicant hereby certifies that all the information submitted on or with this application is true and accurate.

Applicant's signature

Date

Date

For Completion by Administrative Officer

		ion deemed complete://
		RMIT REQUIRED (no permit fee) Structure is outside of mapped flood hazard areas
		Road maintenance with no increase in grade
		Open Space, forestry, or agricultural use
		Other
	Comm	ients:
	ADMII	NISTRATIVE PERMIT APPLICATION FEE \$50.00 (permit application fee received: \$)
		Non-substantial structural improvement
		Small accessory structure
		Building utilities
		At grade parking for existing buildings
		Recreational vehicle
		Other
	Comm	ients:
	COND	ITIONAL USE PERMIT FEE \$150 (application fee \$ received)
Date c	omplet	e application sent to Vermont NFIP Coordinator for review///
Develo	opment	Review Board Hearing Date//
Develo	opment	Review Board Decision Date//
	Permi	t Denied for following reasons:
	Permi	t Granted with following conditions:

Administrative Officer Signature

Date