

TOWN OF BRISTOL

Zoning Permit Application

Permit #: _____ Parcel #: _____ Zoning District _____

The undersigned hereby applies for a Zoning Permit for the following use, to be issued on the basis of the representations contained herein, of which the applicant swears to be true.

Applicant Name: _____ Phone #: _____

Address: _____ Landowner Name: _____

Location of Property: _____

Description of Proposal: _____

Dimensions: Lot size: _____ Frontage on street: _____

Building width: _____ Building length: _____ Building height: _____ Square Footage: _____

Setback from street: _____ Side yard setback: _____ & _____ Rear yard setback: _____

In addition to the above information your application must be accompanied by a map of your property, which shows:

1. The boundaries of your property and location of roads and driveways.
2. The location and orientation of your project on the property.
3. All dimensions of your project.
4. All distances from your project to your property lines ("setbacks") and road(s).

This map need not be professionally prepared but should be drawn to scale, a hand drawn map is sufficient in most cases.

Signature of Applicant: _____ Date: _____

Signature of Landowner: _____ Date: _____

All permit application fees must be paid and above information received before any action on your application may be taken. Permit application fees are non-refundable.

Zoning permit to take effect 15 days from date of issuance. A permit is valid for one (1) year from date issued.

Date Received: _____ Fee Paid: _____

Permit Decision

If a town driveway access permit is required an appointment must be made with the Road Foreman to inspect proposed entry onto Town Road.

Access Permit Granted **YES** _____ **NO** _____ **NOT REQUIRED** _____

If State permit(s) are required, copies must be submitted to the Town.

State Permit(s) Granted **YES** _____ **NO** _____ **NOT REQUIRED** _____

Upon the basis of the representations contained above this application is:

(A) Found to meet the official zoning ordinances of the Town of Bristol and is hereby **APPROVED**.

_____ Zoning Administrator _____ Date

(B) Found not to meet the official zoning ordinance of the Town of Bristol and is hereby **NOT APPROVED** for the following reason(s): _____

_____.

_____ Zoning Administrator _____ Date

(C) Forwarded to the below Appropriate Municipal Body:

Zoning Board of Adjustment Design Review Commission Planning Commission

for the following reason(s): _____

_____.

_____ Zoning Administrator _____ Date

An interested person may appeal any decision by the Administrative Officer within 15 days of the date of such decision.