

Town of Lincoln
62 Quaker Street
Lincoln, VT 05443
(802) 453-2980

zoningadmin@lincolnvermont.org

Application for Zoning Permit

Application #: _____ Date: _____

Applicant's name(s) _____

Applicant's Mailing address _____
Street or PO Box Town/City State Zip

Contact Info: phone _____ email _____

Owner's name(s) and address, if other than applicant _____

Owner's mailing Address _____
Street or PO Box Town/City State Zip

Contact Info: phone _____ email _____

Location of property: 911 Address _____ Parcel ID# _____

Type of Permit: Building _____ Boundary Line Adjustment _____ Subdivision _____ Other _____

Brief (but specific) description of proposed activity _____

Please submit with the application a site plan or sketch (as accurate as possible, but need not be to scale) showing the location of the proposed activity with respect to property boundaries, or for subdivisions and Boundary Line Adjustments the changes in property lines.

It is the obligation of the applicant to identify and obtain any state permits before beginning construction. Contact our Dept. of Environmental Conservation Permit Specialist at (802) 786-5907 for information concerning state permits.

Signature of Applicant _____ Date _____

Signature of Landowner, if other than applicant _____ Date _____

Permit Fees paid: Amount \$ _____ Recording fee \$ _____ Check # _____ Rec'd by _____

Disposition of Permit: Granted _____ Denied _____ Referred to _____ Date _____

Zoning Administrator, Town of Lincoln