DANVILLE ZONING APPLICATION

	FOR ADMINISTRATIVE USE ONLY
APPLICATION#	DATE RECEIVED: FEE PAID:
	DO NOT WRITE ABOVE THIS LINE:
Step 1: TYPE OF PERMIT	*Needs to go before Development Review Board
□ PERMITTED USE (\$35)	☐ SUBDIVISION (\$65) * ☐ DESIGN CONTROL (\$65) *
☐ CONDITIONAL USE (\$65)	* □ VARIANCE (\$65) * □ CELL TOWNER (\$505/SM - \$1005/LG) *
Step 2: ZONING DISTRIC	T (choose one)
☐ MEDIUM DENSITY RESID	DENTIAL 1 ☐ MEDIUM DENSITY RESIDENTIAL 2 ☐ VILLAGE RESIDENTIAL
☐ LOW DENSITY RESIDENT	TIAL ☐ DESIGN CONTROL OVERLAY ☐ HISTORIC NEIGHBORHOODS
☐ DEVELOPED SHORELAN	O OVERLAY □ ROUTE 2 □ CONSERVATION □ VILLAGE CORE
Step 3: APPLICANT/PROD	PERTY OWNER: (PLEASE PRINT – if more than one PROPERTY OWNER a separate sheet can be attached,
APPLICANT NAME(S):	
APPLICANT'S MAILING AD	DRESS:
CONTACT NUMBER:	EMAIL:
Property Owner Name(s) MUST be	the same as recorded on deed. If more than one, separate sheet can be added.
PROPERTY OWNER NAME(S	S):
PROPERTY OWNER'S MAIL	ING ADDRESS:
CONTACT NUMBER:	EMAIL:
Step 4: PHYSICAL LOCA	ΓΙΟΝ OF PROJECT PROPERTY (911 ADDRESS):
Parcel ID#	DEED: BOOK# PAGE#
IS PROPERTY ON TOWN	WATER AND/OR SEWER? □ YES □ NO
Step 5: DESCRIPTION OF	PROJECT

LOT SIZE: (ACRES)	LOT WIDTH:
	SETBACKS
FRONT: FT. (from center of road)	REAR: FT.
RIGHT SIDE: FT.	LEFT SIDE: FT.
	sign of building
	ance, Subdivision, and Design Control Applications)
NAME	MAILING ADDRESS
representation of the facts related to this p	to the best of my/our knowledge, all of the above is a true coposed project. I/We also hereby request a Hearing before the
By signing below, I/We hereby certify that, representation of the facts related to this p Development Review Board if application Applicant	oposed project. I/We also hereby request a Hearing before the s for a Conditional Use, Variance, Subdivision or Design Control.
By signing below, I/We hereby certify that, representation of the facts related to this position Development Review Board if application Applicant SIGNATURE OF ALL PROPERTY OWN	coposed project. I/We also hereby request a Hearing before the s for a Conditional Use, Variance, Subdivision or Design Control. Date: ERS REQUIRED (If additional lines required, a separate piece of paper can be added
By signing below, I/We hereby certify that, representation of the facts related to this possible powerlopment Review Board if application Applicant SIGNATURE OF ALL PROPERTY OWN Property Owner	coposed project. I/We also hereby request a Hearing before the s for a Conditional Use, Variance, Subdivision or Design Control. Date: ERS REQUIRED (If additional lines required, a separate piece of paper can be added
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By signing below, I/We hereby certify that, representation of the facts related to this p Development Review Board if application Applicant SIGNATURE OF ALL PROPERTY OWN Property Owner FOR A ZONING ADMINISTRATIVE OFFICE	coposed project. I/We also hereby request a Hearing before the s for a Conditional Use, Variance, Subdivision or Design Control. Date: Date: Date: Date: Date: Date:
By signing below, I/We hereby certify that, representation of the facts related to this p Development Review Board if application Applicant SIGNATURE OF ALL PROPERTY OWN Property Owner FOR A ZONING ADMINISTRATIVE OFFICE □APPROVED □ DENIED	Date: Da
By signing below, I/We hereby certify that, representation of the facts related to this powelopment Review Board if application Applicant SIGNATURE OF ALL PROPERTY OWN Property Owner FOR A ZONING ADMINISTRATIVE OFFICE □APPROVED □ DENIED *Note: All applications for CONDITION	Date: Da
By signing below, I/We hereby certify that, representation of the facts related to this prevelopment Review Board if application Applicant SIGNATURE OF ALL PROPERTY OWN Property Owner FOR A ZONING ADMINISTRATIVE OFFICE APPROVED □ DENIED *Note: All applications for CONDITION will automatically be DENIED pending a ADMINISTRATIVE OFFICER'S SIGN.	Date: Da
By signing below, I/We hereby certify that, representation of the facts related to this prevelopment Review Board if application Applicant	Date: