

**TOWN OF MORGAN  
APPLICATION FOR ZONING PERMIT**

Permit # \_\_\_\_\_

Beth Torpey – Zoning Administrator – phone: (802) 895-3013/323-3235 [morganzoning@gmail.com](mailto:morganzoning@gmail.com)

The undersigned hereby applies for a zoning permit for the following use, to be issued on the basis of the representations contained herein, all of which the application swears to be true.

Applicant

Landowner

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Location of Property: 911# \_\_\_\_\_ Email \_\_\_\_\_

Deed Recorded: Vol. # \_\_\_\_\_ Page(s) \_\_\_\_\_

If project is within 250' of the lakeshore, was a Shoreland Protection Permit obtained? Yes\_\_ No \_\_  
If “no”, contact the VTDEC’s Shoreland Protection unit at (802) 490-6200.

Nature of Work: New Construction \_\_\_\_ Structural Alteration \_\_\_\_ Other \_\_\_\_

Existing Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

Property Dimensions: Lot Size \_\_\_\_\_ Lot Length \_\_\_\_\_ Lot Width \_\_\_\_\_

Distance between project location and closest adjacent property:

Front: \_\_\_\_\_ Side: \_\_\_\_\_ Side: \_\_\_\_\_ Rear: \_\_\_\_\_

NOTE: A general plot plan showing the layout of the property and buildings or work areas (including septic system and well or spring) must be attached to this application.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Application

**DECISION OF ADMINISTRATION OFFICER**

Date Received: \_\_\_\_\_ Fee: \_\_\_\_\_ Permit # \_\_\_\_\_

Approval \_\_\_\_\_ Denied \_\_\_\_\_

Referred to: Planning Commission \_\_\_\_\_ Board of Adjustment \_\_\_\_\_

Date Acted Upon: \_\_\_\_\_ Date Permit Becomes Effective: \_\_\_\_\_

NOTE: An interested person may appeal a decision of the Administrative Officer within fifteen (15) days of the date of such decision. This permit shall not take effect until the time for such appeal has passed.

\_\_\_\_\_  
Signature of Administrative Officer

\_\_\_\_\_  
Date of Issuance