TOWN of MILTON, VT | CERTIFICATE of COMPLIANCE APPLICATION

If you have any questions, call (802)893-1186 or visit us in the Milton Municipal Complex at 43 Bombardier Road, Milton, VT 05468.

DO NOT SUBMIT THIS FORM IF THE PROJECT DOES NOT MATCH THE APPROVED PERMIT. PLEASE CALL US. IF THE PROJECT FAILS INSPECTION, YOU WILL NOT BE REFUNDED AND WILL HAVE TO RE-APPLY.

FILING INFORMATION (STAFF USE ONLY)	PROPERTY INFORMATION	
· · · · · · · · · · · · · · · · · · ·	E-911 Address/Street:	
Zoning Permit	Parcel ID:	
Filing Date/	School Parcel Account # 396 - 123	
Expedited Review Due / /	-	
	Deed: Volume no/ Page no	
LANDOWNER	APPLICANT □ check	box if same as landowne
Name(s)	Name(s)	
Mailing Address	Mailing Address	
City	City	
State Zip Code	State Zip Code	
Phone	Phone	
Email	 Email	
	-	
 All representations made in this application and the mater knowledge; State and federal regulations may apply, may be more or laresponsibility to obtain all required state and federal perm. No use or occupancy of the development may commence. Vermont law requires that applicants determine whether or not the san RBES or CBES Certificate required for this play lifyes, the Applicant must record the Certification in the Town of A Compliance/Occupancy. 	ess restrictive than Milton's bylaws, and may afferits; (Call the State's permit specialist at 802-477-2 e until receipt of all applicable permits and certificate project requires an RBES or CBES Certificate.	ect this project; it is m 241 with any questions) cations.
Landowner Signature	Applicant Signature	/
FEE CALCULATOR		_
Base Application Fee	refer to <u>fee schedule</u>	
Unit Fee (if applicable)	#units x \$ =	+
SUBTOTAL After the East Penalty (if applicable)	add lines above	=
After-the Fact Penalty (if applicable) Violation Penalty (if applicable)	multiply subtotal by 2 multiply subtotal by 4	_ _
Expedited Review (check to request)	add surcharge due	+
□ 3-day or □ 5-day	aud surcharge due	•
Recording Fee	established by Clerk's schedule	+ \$10
TOTAL	add subtotal to lines below subtotal	= \$

INSPECTION REPORT (STAFF USE ONLY)		
ZONING PERMIT		
Site inspection performed by on [date]/		
E-911 Address Posted? □ Not Applicable (no new unit) □ Yes □ No		
Development, use & dimensions comply with permit? ☐ Not Applicable ☐ Yes ☐ No, because:		
Development Review		
Prior development review? □ No □ Yes, Case Description(s)		
Decision review performed by on [date]/		
Development review conditions met? : \square Not Applicable $ \square$ Yes $ \square$ No, because:		
Impact Fee Impact Fee(s) Paid? □ Not Applicable (no new dwelling unit) □ Yes [date paid] / / □ No		
Energy Standards Certificate		
RBES/CBES Certificate Recorded in the Land Records? □ Not Applicable □ Yes: Book, Page □ No		
New Manufactured Home		
Was the HUD 309 form provided? □ Not Applicable □ Yes □ No		
General		
All other Zoning Permit conditions met? \square Not Applicable (no other conditions) \square Yes \square No, because:		
WATER/WASTEWATER PERMIT		
□ Town Water Permit #		
Inspection performed by on//		
Development complies with permit? Yes No, because:		
Signature Date /		
HIGHWAY ACCESS PERMIT		
□ Town Highway Access Permit #		
Inspection performed by on//		
Development complies with permit? □ Yes □ No, because:		
Signature /		
NEW PRIVATE ROAD		
Was the Engineer Certification Letter provided? □ Not Applicable □ Yes □ No, because:		
CERTIFICATION DECISION BY ZONING ADMINISTRATOR (STAFF USE ONLY)		
□ APPROVED (ZR Section 1010 fully met, you are hereby issued a Certificate of Compliance/Occupancy for the permit(s) listed above)		
DENIED (This decision can be appealed to the Development Review Board per Zoning Regulation Section 1060).		
Reason for denial:		
Zoning Administrator Signature		