

# Town of Starksboro

## REQUEST FOR CERTIFICATE OF COMPLIANCE OR OCCUPANCY

PO Box 91, Starksboro VT 05487 | 802-453-2639 | STARKSBOROVT.ORG

**Check one:** Certificate of Compliance \_\_\_\_\_ Certificate of Occupancy \_\_\_\_\_

**Fee: \$65.00** Received/chk # \_\_\_\_\_ **Building Permit #:** \_\_\_\_\_

**Recorded:** Book \_\_\_\_\_ Page \_\_\_\_\_

**Property owner(s):** \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_ Email: \_\_\_\_\_

**Name of applicant:** \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing address: \_\_\_\_\_ Fax: \_\_\_\_\_  
\_\_\_\_\_ Email: \_\_\_\_\_

**Property information:** Map #: \_\_\_\_\_ Parcel #: \_\_\_\_\_

**Property location (911):** \_\_\_\_\_ Energy Code compliant:  Yes or  No

**Approximate date property owner acquired:** \_\_\_\_\_ **# of Bedrooms:** \_\_\_\_\_

**Use of property:** Residential \_\_\_\_\_ Agriculture \_\_\_\_\_ Non-residential \_\_\_\_\_  
Other: \_\_\_\_\_

**Structures on property:**  
\_\_\_\_\_  
\_\_\_\_\_

**Prior zoning/land development permits:** \_\_\_\_\_  
\_\_\_\_\_

**Signature of applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Applicant/owner understands that issuance of a certificate of compliance does not preclude the Town from pursuing any enforcement action or taking appropriate action to ensure compliance with Starksboro's Zoning Bylaws.*

**Requested by:** Property owner \_\_\_\_\_ Attorney \_\_\_\_\_ Other \_\_\_\_\_

### FOR OFFICE USE ONLY

Date received: \_\_\_\_\_ Fee paid/ck. #: \_\_\_\_\_

Certificate No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Zoning District: \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Reasons/conditions to action: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Zoning Administrator: \_\_\_\_\_ Date: \_\_\_\_\_