

**TOWN OF THETFORD APPLICATION FOR A SIGN PERMIT**

**APPLICATION #:** \_\_\_\_\_  
(To Be Assigned By The Zoning Office)

**PARCEL ID #:** \_\_\_\_\_

*The undersigned hereby applies for a Sign Permit for the project and use described below. A permit is issued on the basis of the representations contained herein. The permit shall become null and void in the event of misrepresentation and/or not being in compliance with State and Town laws and regulations, or failure to complete construction or initiate a use within two (2) years of the date of approval. In the event of noncompliance, I understand that this permit may be suspended until proper approval(s) is/are granted.*

1). Name of Landowner (Print) \_\_\_\_\_

Mailing Address \_\_\_\_\_

(Street or PO Box, Town, State and Zip Code)

Telephone Number \_\_\_\_\_ Email: \_\_\_\_\_

2). Name of Applicant – If different (Print) \_\_\_\_\_

Mailing Address \_\_\_\_\_

(Street or PO Box, Town, State and Zip Code)

Telephone Number \_\_\_\_\_ Email: \_\_\_\_\_

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3). **Sign Project Location:** House #: \_\_\_\_\_ Street: \_\_\_\_\_

Parcel ID: \_\_\_\_\_ Zone: \_\_\_\_\_

Tax Map No (Routing): \_\_\_\_\_

Historic:

Is the property located in a special flood hazard area? Yes \_\_\_\_\_ No \_\_\_\_\_

4). **Please attach a copy of the tax map locating your property and all abutters.**

5). Description of sign (Including Use): \_\_\_\_\_

\_\_\_\_\_

6). **Dimensions of the sign:**

A. Area of Lot (Acres) \_\_\_\_\_

B. Dimensions of Proposed Sign \_\_\_\_\_

C. Setback of the Sign from Property Lines (Minimum 15') Side \_\_\_\_\_ Side \_\_\_\_\_ Rear \_\_\_\_\_

D. Setback from Centerline of Traveled Way \_\_\_\_\_

E. Will this sign be Illuminated Yes \_\_\_ No \_\_\_\_\_

7). **Please supply a sketch to scale on 8 1/2" x 11" paper showing sign dimensions, sign type, materials, colors used, letter height and style, method of construction and attachment.**

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Continued on other side)

**TOWN OF THETFORD APPLICATION FOR A SIGN PERMIT – (Concluded)**

**CERTIFICATION STATEMENT**

10). I, the undersigned, agree to abide by the Vermont Health and Environmental Regulations and the Town of Thetford Health and Zoning Regulations. The drawings, data, and statements, which I have included in this application, are true and correct.

The signatory, if other than the landowner, must submit a written statement from the landowner authorizing the signatory to submit this application.

\_\_\_\_\_  
(Circle) Landowner – Authorized Agent – Lessee – Optionee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

\*\*\*\*\*

11). Filing Fee \_\_\_\_\_ Hearing Fee \_\_\_\_\_ Rec'd by \_\_\_\_\_ Date \_\_\_\_\_

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By your signature below, you are giving the Listers permission for an **exterior** inspection of your Signage. Contact the Board of Listers for details or concerns at #785-2922, Ext. 4 during office hours, Tuesday and Wednesday, 8:30AM to 4PM.

\_\_\_\_\_  
Homeowner

\_\_\_\_\_  
Date

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**HEARING INFORMATION**

Hearing Not Required                      Hearing Required                      Variance                      Conditional Use

Reason: \_\_\_\_\_

HEARING DATE(S): \_\_\_\_\_

Findings: \_\_\_\_\_

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APPLICATION APPROVED \_\_\_\_\_ APPLICATION DENIED \_\_\_\_\_

\_\_\_\_\_  
Administrative Officer

\_\_\_\_\_  
(Vice) Chairman Zoning Board of Adjustment

**PLEASE NOTE:** *The decision of the Administrative Officer may be appealed to the Development Review Board within 15 days of the date of the decision. No construction pursuant to this permit may begin until the appeal time has run. State permits may be required for this project. It is the obligation of the appellant to identify and obtain necessary state permits before beginning construction. All permits for wastewater and potable water are State issued. To obtain information regarding permits for wastewater and potable water, contact the Agency of Natural Resources, Wastewater Management Division, #(802)476-0190. To contact the regional State Permit Specialist for the Thetford area to determine what other state permits may be required, contact the Agency of Natural Resources Permit Specialist at #(802)476-0195.*