



Town Of Montgomery

P.O. Box 356
Montgomery Center, VT 05471
802-326-4719

<http://www.montgomeryvt.us>

APPLICATION FOR DETERMINATION OF ZONING COMPLIANCE ZONING ADMINISTRATOR PHONE 326-9001, FAX 326-5053

OWNER(S) OF RECORD: _____

PROPERTY LOCATION: _____

PROPERTY TAX I.D. # _____ DATE PURCHASED: _____

PURCHASED FROM: _____

List all structures on the property and the year of construction: _____

Current use of the property: (check all that apply)

Residential__ (no. of units) _____

Commercial__ describe _____

Farming__ describe all structures _____

If the property is being transferred, what uses are contemplated? _____

List all structures or additions that have been built or rebuilt since January 1, 1976; include garages, fences, porches, etc. Give date of construction or installation. _____

Year septic was installed _____

I certify that the above information is true and correct to the best of my knowledge and belief. This information is given in furtherance of a request for a determination as to zoning violation on the above described property.

signature

print name

Date: _____ to whom and where notice is sent or faxed _____

Fee of \$35.00 payable to the Town Of Montgomery must accompany the application which is submitted through the Town Clerk's Office.