

Town of



Sign Application

Location of Property: \_\_\_\_\_ Parcel ID # \_\_\_\_\_

**OWNER:**

Name of Land Owner: \_\_\_\_\_

Mailing Address (street or box #) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Numbers: Daytime \_\_\_\_\_ Night \_\_\_\_\_ E-Mail \_\_\_\_\_

**AGENT:**

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

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Numbers: Daytime \_\_\_\_\_ Night \_\_\_\_\_ E-mail \_\_\_\_\_

Property Owner's Deed was Recorded on: Date of Sale \_\_\_\_\_

What is the present Approved use(s) of the property? \_\_\_\_\_ Frontage: \_\_\_\_\_ # of Businesses \_\_\_\_\_

Are you applying for a variance? Yes No

Information you believe will be helpful to the Board specific to the Criteria for granting a **Variance** (see the five Criteria below). Please use a separate sheet of paper if you need more space.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PERMISSION TO ENTER THE PROPERTY:** Signing of this application authorizes the Zoning Administrator, Development Review Board, and/or the Listers' to enter onto the premises for the purpose of verifying the information presented.

I, \_\_\_\_\_, am the owner of property at \_\_\_\_\_, and I hereby authorize \_\_\_\_\_ to represent me and speak on my behalf before the Development Review Board in the matter of this case.

\_\_\_\_\_  
Owner Signature/Date Agent Signature/Date

This information must be submitted with a plot plan, a floor plan where applicable, as well as an application fee. Other forms may be required. Your plot plan must contain all the information listed on the next page. After initial review you will be provided with any other application material that is required, and with information on procedures and additional fees. **INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.** If you have questions, please contact the Zoning Administrator at 802-464-8591. **RETURN APPLICATION TO:** Zoning Administrator, PO BOX 217, Wilmington, VT 05363.

**Dimensions of the Proposed Sign(s):**

Single-sided signs (for example, signs on the building wall):

Location	Length	Width	Area	Type of Illumination
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Freestanding Sign (for example, signs on poles):

Height above ground	Length	Width	Area	Type of Illumination
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

A-frame signs

Location	Length	Width	Area	Type of Illumination
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Perpendicular (or Projecting) signs:

Height above ground	Length	Width	Area	Type of Illumination
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Signs on the property now:**

Location/Design	Length	Width	Area	Will this sign be removed? remove/remain/replace
_____	_____	_____	_____	remove/remain/replace
_____	_____	_____	_____	remove/remain/replace
_____	_____	_____	_____	remove/remain/replace
_____	_____	_____	_____	remove/remain/replace
_____	_____	_____	_____	remove/remain/replace

**FOR USE BY THE ZONING ADMINISTRATOR**

Parcel # \_\_\_\_\_

Application # \_\_\_\_\_ Date Received \_\_\_\_\_ Fee Received \_\_\_\_\_

Development Review Board Hearing Date \_\_\_\_\_ Date Warned \_\_\_\_\_

Permit Type: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Reason \_\_\_\_\_

Administrative Officer's Signature \_\_\_\_\_ Date \_\_\_\_\_

**FEE SCHEDULE**

Owner Name \_\_\_\_\_

Fees must be included with the Application. Please make checks payable to the Town of Wilmington. Application Fees are non-refundable. The fees below are the most used; they do not include all fees. Please refer to the full fee schedule.

Base Application Fee (\$50 + \$18 filing fee)	\$68.00
DRB Hearing	\$88.00
TOTAL	_____