

Town of



For Office Use: Permit # _____

Parcel Lot ID# _____

Notice of Appeal

As per 24 VSA. § 4465, an interested person may appeal any decision or act taken by the administrative officer in any municipality by filing a notice of appeal with the secretary of the Development Review Board or with the clerk of that municipality if no such secretary has been elected. This notice of appeal must be filed within 15 days of the date of that decision or act, and a copy of the notice of appeal shall be filed with the administrative officer (Zoning Administrator).

Location of Property _____

Name of Appellant _____

Mailing Address _____

City _____ State _____ Zip _____

Telephone Day _____ Cell _____ Email _____

(optional) Agent _____

Mailing Address _____

City _____ State _____ Zip _____

Telephone Day _____ Cell _____ Email _____

Property Zoning District:

- Conservation CON
- Village VIL
- Residential RES
- Resort – Residential R - RES
- Commercial/Residential COM/RES
- Resort - Commercial/Residential R – COM/RES

Property Zoning Overlay:

- None
- Flood Hazard Zone FLOOD
- Historic Design Review HDRD
- Village Design Review VDRD

Has Sewer Allocation been obtained?

- Yes No Not Applicable

Fees must be included before your application is considered complete. Make checks payable to the Town of Wilmington. Fees are non-refundable. Additional fees may be added, please refer to the full fee schedule.

Appeal hearing fee \$150 _____

Other fees (list to left) _____

Date paid _____ Total due: _____

Permit # in question (if applicable): _____

Describe the reason for the requested Appeal:

Brief description of the property with respect to which the Appeal is taken:

A reference to applicable provisions of these regulations:

The relief requested by the appellant, including any request for a variance from one or more provisions of these regulations: _____

The alleged grounds why such relief is believed proper under the circumstances:

I am/represent an Interested Party who is appealing a decision but I do not own the property in question.

Appellant Signature/Date

(optional) I, _____, hereby authorize the Development Review Board, and/or the Listers to enter onto the premises for the purpose of verifying the information presented.

Owner Signature/Date

(optional) I, _____, hereby authorize _____
to represent me and speak on my behalf in the matter of this case.

Agent Signature Date

Appellant Signature/Date

Completed notice of appeal received by _____, on (date) _____

Official's Signature/Date