



**Department of Planning and Zoning**

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[www.burlingtonvt.gov/pz](http://www.burlingtonvt.gov/pz)

**Non-Applicability of Zoning Permit Requirements**

This form is a written verification from the Department of Planning and Zoning that based upon the description and statement given by the owner/applicant, a zoning permit is not applicable or required for the proposed project. Please submit this form, **with photograph(s)** of the area(s) where work is proposed, to the Planning and Zoning Office.

**NOTE: THIS IS NOT AN APPROVAL TO START WORK.**  
**CONSTRUCTION PERMITS WILL ALSO BE REQUIRED FROM THE DEPARTMENT OF PUBLIC WORKS AT 645 PINE STREET. VISIT THE OFFICE OR CALL 802-863-9094**

<b>PROJECT LOCATION ADDRESS:</b>	
<b>PROPERTY OWNER*:</b> <small>*If condominium unit, written approval from the Association is also required</small>	<b>APPLICANT :</b>
POSTAL ADDRESS: CITY, ST, ZIP: DAY PHONE: EMAIL: <b>SIGNATURE:</b> _____ <small>I am the owner. In addition, I duly authorize the applicant (if noted) to act on my behalf for all matters pertaining to this application.</small>	POSTAL ADDRESS: CITY, ST, ZIP: DAY PHONE: EMAIL: <b>SIGNATURE:</b> _____

**Description of Proposed Project:**

**Existing Use of Property:**    Single Family    Multi Family:    Units    Other:

**Proposed Use of Property:**    Single Family    Multi Family:    Units    Other:

**OFFICE USE ONLY** Zone: \_\_\_\_\_ Eligible for Design Review? \_\_\_\_\_ Year Constructed? \_\_\_\_\_ Property Size? \_\_\_\_\_

**Based upon the above description, the proposed work does not require a zoning permit for the following reason(s):**

Project constitutes repair/maintenance or replacement in-kind.

Project is exempt from Zoning Permit requirements per Section 3.1.2(c)1 of the Zoning Ordinance.

Other: \_\_\_\_\_

**Reviewed and approved by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Additional Notes: \_\_\_\_\_

Non Applicability Reference #: \_\_\_\_\_