

To: #4261-16 | 337 Rockingham Hill Road | Parcel ID 10-0050 337  
Applicant: Stephen Brown, Metta McGarvey  
Date: July 18, 2016  
RE: ZONING PERMIT DECISION – APPROVED ACCESSORY STRUCTURE

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This zoning application is found to meet the provisions of the Town of Rockingham Zoning Bylaw and is hereby administratively approved. The permit is issued for a small 8x16 shed (accessory structure) that augments a residential use as outlined in the application and attached sketch.

The proposed accessory structure meets the requirements allowed in the Rural Residential 1 Zoning district under section 2411 of the Rockingham Zoning Bylaw.

All property setbacks are greatly exceeded. Property is 169 acres and home/shed are located in the lot interior. While the sketch plan shows approximated setbacks, the numbers so greatly exceed the dimensional minimums that they are not relevant.

The project shall be completed in accordance with the attached application and sketch plan. No alterations shall be made in the project except where written application to the Zoning Office has been made and the required approvals obtained.

A zoning approval notice sign is attached to this permit and must be posted at the construction site and easily viewable from a public road or street. The sign must be in place for a period of 15 days starting with the date the permit is issued. The 15 day public notice requirement is mandated by Vermont Law.

The permit is effective 15 days from date of decision. A zoning permit shall become void if the work described therein has not been started within two years from the date of issuance.

An interested person may appeal a decision of the Zoning Administrator to the Zoning Board of Adjustment. An appeal must be taken within 15 days of the date of the Zoning Administrator's decision. After the 15 day period, the decision becomes final.

Charles Wise  
Zoning Administrator

18 July 2016  
Date

Cc: Town Clerk  Applicant  Posted  Listers  Web

**TOWN OF ROCKINGHAM  
APPLICATION FOR ZONING PERMIT**

(OFFICE USE ONLY)	
Date filed: <u>15 July 2016</u>	Applicant: <u>Brown / McGarvey</u>
Fee Paid: <u>yes</u>	Owner: <u>Brown / McGarvey</u>
Zoning District: <u>RR-1</u>	Parcel Map# <u>10-0050337</u>
Referred to:	W/in 100 yr. floodplain? <u>No</u>
( ) Planning Commission <u>N/A</u>	W/in Regulated Wetland? <u>No</u>
( ) Board of Adjustment <u>N/A</u>	
Date: <u>N/A</u>	<b>PLOT PLAN ATTACHED &amp; APPLICATION COMPLETE ( )</b>

COMPLETE ALL ITEMS OR APPLICATION WILL BE RETURNED. COMPLETE IN INK. DO NOT USE PENCIL.  
NO CONSTRUCTION OR USE IS TO BE STARTED WITHOUT AN APPROVED PERMIT. IF CONSTRUCTION OR USE BEGINS WITHOUT A PERMIT, A LATE FEE (See Fee Schedule Information) IS ASSESSED.

**PART I  
(ALL APPLICANTS MUST COMPLETE Part I)**

**Owner & Applicant Information**

- PROPERTY OWNER(s) Names: Stephen Brown, Melita McGarvey  
(List Names of all Property Owners as shown on deed.)  
Mailing Address: PO Box 545 Saxtons River VT Zip Code 05154  
Tel. No.: (Daytime) 869-1093 (FAX) --- Email: sbrown@manomet.org
- APPLICANT(s) Names: SAME  
(If different than Landowners)  
Mailing Address: SAME Zip Code \_\_\_\_\_  
Tel. No.: (Daytime) \_\_\_\_\_ (FAX) --- Email: SAME
- Contact Person: Stephen Brown (Daytime Tel.) 869-1093

**Property Information**

- PROPERTY LOCATION: Street Number 337 Street Name Rockingham Hill Rd.
- Property Owner's Deed is recorded in Book 345 Page 37 Date of Sale 4/10/14  
(Information available in Town Clerk's Office)
- Is this lot recorded on a survey or subdivision map in the Town Clerk's Office? Yes  No   
If yes, provide Book \_\_\_\_\_, Page \_\_\_\_\_, and Date Recorded \_\_\_\_\_
- Tax Map 10-0050357  
DIMENSIONS of LAND:  
Area of Lot: 169 Acres (Square Feet or Acres)  
Lot Frontage on Road/Right-of-way ~1200 ft. Lot Depth (front to rear) ~1700 ft.

**Use of Property Information**

8. **CURRENT USE:** Describe What the Property Is Used for Now. If there is more than one use, describe them all.  
Residential: Single-family  Two-Family ( )  
Multiple-family ( ) Number of Apartments \_\_\_\_\_

Describe:

Commercial ( ): \_\_\_\_\_

Industrial ( ): \_\_\_\_\_

Other ( ): \_\_\_\_\_

9. **PROPOSED USE**

Residential:

Single family  Multiple-family ( ) Number of Existing Apartments: \_\_\_\_\_

Two-family ( ) Number of Proposed Apartments: \_\_\_\_\_

Total Number of Apartments: \_\_\_\_\_

Non-residential: Describe the Products You Will Be Making and Activities You Intend to Conduct.

Commercial ( ) \_\_\_\_\_

Industrial ( ) \_\_\_\_\_

Other ( ) \_\_\_\_\_

10. What, if any, Current Uses Will Continue ( List): single family residence

11. Prior Zoning Permits. Has this parcel of land been the subject of any prior Town Zoning Permits or Subdivision Permits? If yes, indicate for what: None I know of. / Confirmed

**Proposed Construction Activity**

12. New Construction  Shed, 8x16, with 4' porch  
Describe Briefly

Remodeling/Addition ( ) \_\_\_\_\_

Has construction started? Yes \_\_\_\_\_ No  Describe: \_\_\_\_\_

For property within the **Design Review & Historic Districts**, see Part III for additional information to submit with application.

13. Residential: Current Number of Bedrooms 4 Number of bedrooms after remodeling/addition: 4

14. Approximate Construction Costs: \$3000

15. SIZE OF PROPOSED STRUCTURE OR ADDITION: Width 8 ft. Length 16 ft.

- p. ( ) Loading areas
- q. ( ) Pedestrian walks
- r. ( ) All changes to the physical features of the site. Include soil removal or filling areas.

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Application # 4261-16

## Signatures

**Signatures:** All Landowner(s) and Applicant(s) must sign the application.

By signing below, I certify that all information on this application and all supporting forms, plans, and documents are true and accurate and agree that, if any such information is found to be false or misleading, any permit or other approval granted on the basis of such information shall be deemed null and void.

Property Owner(s) Signature(s)	<i>Stephen Brown</i>	Date: <u>7/14/16</u>
	<i>Metta Kirum McGarry</i>	Date: <u>7/14/16</u>
		Date: _____
Applicant(s) Signature(s)		Date: _____
		Date: _____
		Date: _____

