

TOWN OF WINCHESTER ZONING PERMIT APPLICATION

Permit is null and void if issued in error or if applicant misrepresents and facts.

Town of Winchester Parcel No. _____

Property Owner: _____ Send to _____

Applicant/Builder _____ Send to _____

PERMIT TO BE MAILED TO:

Street address _____

City _____ State _____ Zip code _____

Contact Name _____

Contact's Phone Number _____

SITE ADDRESS: _____

City _____ Zip code _____

Plat/CSM _____

Lot _____ Block _____ S _____ T _____ R _____

Lot size _____ Existing Use: _____

Existing Structures _____

PROPOSED CONSTRUCTION Start date _____

() Principal TYPE () New () Alteration

() Accessory () Addition () Other

Describe Proposed Construction _____

1st Floor: Hgt _____ Size _____ Sq. ft. _____

2nd Floor: Hgt _____ Size _____ Sq. ft. _____

Garage Hgt _____ Size _____ Sq. ft. _____

Structure overall height _____ Walk-out basement _____ Estimated Cost \$ _____

Permission is hereby granted for Town of Winchester Zoning Staff to enter the property for inspection purposes until Certificate of Compliance is issued

SIGNATURE _____ Date _____