

Town of Huntington
Application for Zoning Permit

Permit # _____

The undersigned hereby applies for permission to make certain improvements or changes as described below. All construction is to be completed in accordance with the zoning laws of the Town of Huntington. All approved permits expire two years from date effective.

Owner(s) Name: _____

Mailing Address: _____

Phone Number: _____ Zone Classification: _____

Area of Parcel: _____ Acre(s) or _____ Square feet

Is the parcel:

- Different than mailing address please specify here _____
- Assigned Enhanced 911 Locatable Address? Yes No
- A subdivision of larger parcel requiring State Land Use Permit? Yes No
- Located partially or totally in the Flood Hazard Zone? Yes No
- Enrolled in the State Current Use Program? Yes No
- In the approval process for a driveway permit? Yes No Not Required

Type of Improvement:

- | | |
|--|---|
| <input type="checkbox"/> Single Family Residence | <input type="checkbox"/> Deck |
| <input type="checkbox"/> Two Family Residence | <input type="checkbox"/> Garage |
| <input type="checkbox"/> Mobile Home | <input type="checkbox"/> Addition |
| <input type="checkbox"/> Modular Home | <input type="checkbox"/> Outbuilding (Shed, Barn, etc.) |
| <input type="checkbox"/> Multiple Family Residence | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Change of Use |
| <input type="checkbox"/> Recreational | Cost: _____ |
| <input type="checkbox"/> Sign | Contractor: _____ |

Dimensions of Improvement? (Outside Measurements)

Width _____ ft., Length _____ ft., Story Height _____, Total area _____ Sq. Ft.

Setbacks (assumed in feet unless otherwise stated)

Road Center Line _____, Right Property Line _____, Left _____, Rear _____

Frontage on Road or Right of Way _____

If Applicable, Width of Right of Way _____

Provide map showing parcel location and detailed location on parcel of proposed improvement(s), existing structures, septic, well and any other pertinent information.

Other remarks or further description: _____

Signature of Owner(s) _____ Date: _____

_____ Date: _____

Signature of Witness _____ Date: _____

Permit Fee _____ + \$7.00 Recording Fee Date Paid _____ Rcvd by _____

Approved ___ Denied ___ Date Effective _____ Parcel ID _____ MapID _____

Zoning Administrator Signature _____ Date _____