d. southwick@stalbansvt.com

Permit No. B20-000108

RECEIVED
SEP 09 2020
CITY OF ST. ALBANS
Zoning Office

APPROVED

SAINT ALBANS
Vermont

PERMIT APPLICATION for BUILDING, CONSTRUCTION, USE or OTHER APPROVAL under the CITY OF SAINT ALBANS LAND DEVELOPMENT REGULATIONS

Applicant(s) Daniel + Karen Lunneau **Daytime Phone** 802-309-9243
Landowner(s) Daniel + Karen Lunneau **Daytime Phone** 802-309-9243
Mailing Address 20050 Main St, St. Albans, VT **Parcel ID #** 26079190
Parcel Address 90 50 Main St. **Zoning District** B-2 / DR-4
Email dlunneau@handycars.com

Proposed Activity (check all that apply)

New Use - $20 / $50[1]		New Single Family Dwelling $30 / $90[1]	
Accessory Use - $20 / $50[1]		Two-Family Dwelling $30 / $90[1]	
Temporary/Seasonal Use - $20 / $50[1]		Multi-Family Dwelling $30 / $90[1]	
New Commercial Structure $50 / $300[1]	50.00	Renovation/Addition to Resident. Structure $30 / $90[1]	
Renovation/Addition to Comm. Structure $50 / $300[1]		Pool - above ground $20 / $50[1] or in-ground $30 / $60[1]	
Accessory Structure - $20 / $50[1]		Fence - $20 / $50[1] (waived if under 6 feet in height)	
Boundary Line Adjustment[2] - $90 / $140[1]		Demolition - $50 / $100[1]	
Subdivision[2] $90 / $140[1]		Other - specify PAINT EXTERIOR	

[1] *After the fact* [2] *Exempt if paid as part of a DRB Hearing*

Description of Proposed Activity (attach additional pages as needed)	**Fees Continued:**	
PAINT EXTERIOR	Total of Fees from Above:	50.00
EST Cost $2400.00	Residential Construction Fee - $4.00 per $1,000 in work cost estimate	
Paint color to match existing	Commercial Construction fee - $5.00 per $1,000 in work cost estimate	
color. Stonington Gray HC-170	City Clerk Recording Fee (for each permit) $15.00	15.00
	Records Management Fee (for each permit) $12.00	12.00
Cost of work: $2400.00	**Total Permitting and Recording fees:**	77.00
Expected Completion Date: 10-15-2020	Check # or Cash Amt Remitted:	

I certify the submitted information to be true and accurate. ***All fees for an approved application are non-refundable.***

Signature of Owner: [signature] **Date:** 9-9-2020

Signature of Applicant: [signature] **Date:** 9-9-2020

APPEAL: You have the right to appeal this decision to the City of St. Albans Development Review Board (City of St. Albans Zoning Regulations Sect 905.1 A) within 15 days of the date of the decision. **No construction is allowed during the appeal period.** An approved permit shall expire 3-12 months after the appeal period end date, unless commencement of the permitted activity is demonstrated. (City of St. Albans Zoning Regulations Sect 903 (A) (3))

FOR COMPLETION BY ADMINISTRATIVE OFFICER

1) Approved: 9/9/20 Posted: 9/9/20 This approval shall not become effective until 9/24/20
2) Denied:

9/9/2020 [signature]
Date of Action Administrative Officer

(PLEASE TURN OVER FOR ADDITIONAL INFORMATION)

Mayor: Tim Smith
Ward 1: Timothy Hawkins
Ward 2: James Pelkey
Ward 3: Marie Bessette
Ward 4: Michael McCarthy

SAINT ALBANS
Vermont

Ward 5: Kate Laddison
Ward 6: Chad Spooner
Clerk/Treasurer: Curry Galloway
City Manager: Dominic Cloud

PERMIT LETTER

Permit Date: 09/09/2020

Parcel Number: 26079190

Permit Number: B20-000108

Parcel Owner: THE DANIEL J LUNEAU FAMILY TRUST

Permit Type: Renovation/Addition

Parcel Address: 190 SO MAIN ST St Albans City, VT 05478

Project Summary: re-paint exterior using similar colors

Decision: Issued

Conditions:

1. The application and submittals for the above referenced project have been reviewed and the permit is **APPROVED. This approval applies only to the information listed on the drawings and specifications that have been submitted.**
2. The Permit Placard shall be displayed on the subject premises and be clearly visible from a public way. Notice shall be displayed at the time of application and shall not be removed until after the appeals expiration date or until the project is completed, whichever is longe
3. In addition to periodic inspections, a final inspection may be required.
4. This project shall adhere to all Land Development Regulations.
   a. Stonington Gray HC-170
5. This project shall adhere to all Board Conditions.
   a. none

This permit does not satisfy the requirements of the state. You must contact the state permitting specialist to determine those requirements.

This permit expires after 09/09/2022 unless commencement of the project has begun and remained continuous. If you have any questions or if I can be of further assistance, please contact me at 802-524-1500 ext *262 or d.southwick@stalbansvt.com.

September 09, 2020
Date

Property Services

PUBLIC NOTICE

PER CITY OF ST. ALBANS LAND DEVELOPMENT REGULATIONS

Address: 190 SO MAIN ST, St Albans City, VT 05478

Applicant: THE DANIEL J LUNEAU FAMILY TRUST

Project Description: re-paint exterior using similar colors

☒ **Permit / Approval**

Type: B20-000108

Date Issued: SEPTEMBER 9, 2020

Appeal by: SEPTEMBER 24, 2020

☐ **Public Hearing Notice**

Date / Time:

Place:

Purpose:

FOR MORE INFORMATION, CONTACT:
PLANNING & PERMITTING ADMINISTRATOR, CITY OF ST. ALBANS PO BOX 867,
100 NO. MAIN ST., ST. ALBANS, VT 05478, PHONE: 802-524-1500 X *262
EMAIL: INFO@STALBANSVT.COM
WEB:WWW.STALBANSVT.COM/PLANNING

Applicant: This notice shall be displayed on the subject premises and be clearly visible from the public way. Notice shall be displayed at the time of application and shall not be removed until after the appeals expiration date.

ADMINISTRATIVE OFFICIAL

SAINT ALBANS

VERMONT LAND USE Education & Training Collaborative

SAINT ALBANS
Vermont

PERMIT NO: B20-000108

City of St. Albans
Certificate of Posting

The municipality shall fulfill all posting requirements listed below, while the applicant shall be responsible for all of the following postings, as part of the permit application requirements:

Posting of Notice of Permit (24 V.S.A. § 4449 and Section 905 of the City of St. Albans Zoning Bylaws)

- The applicant shall post the notice of permit, on the form prescribed by the town, within view from the public right of way most nearly adjacent to the subject property, until time for appeal has passed.

  Date of Posting: Sept 9, 2020

  Location: 190 SO MAIN ST, St Albans City, VT 05478

CERTIFICATION:
I, the undersigned, attest that I have completed the posting and notice requirements listed above, and fully understand and assume all responsibility, as part of my permit / permit application requirements, to properly post and maintain this notice for the required time period. Failure to do so may void my permit.

On-file
Applicants' Signature

9/9/2020
Date