

PERMIT LETTER

Permit Date:

Parcel Number: 25087113

Parcel Owner: LEGRAND
LISA M

Parcel Address: 113 UPP WELDEN ST St Albans City,
VT 05478

Permit Number: B25-
000019

Permit Type: Accessory
Structure

Project Summary: Adding a 10' x15' Lean-to onto the back of the existing barn.

Decision: Approved

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 longer

3. In addition to periodic inspections, a final inspection may be required.

This project shall adhere to all Land Development Regulations.


4. a. Approved per application and drawing submitted. Any changes must be approved by the zoning administrator.

5. This project shall adhere to all Board Conditions.
a. None

This permit expires after 04/18/2026

- o If work has not been completed, **prior** to reaching the expiration date of the permit/approval, please consult with the Zoning Administrator for renewal details OR to seek new Development Review Board approval if previously required. See Article 9 of the St. Albans City Land Use Regulations for details on expirations.
- o This permit does not satisfy the requirements of the state. You must contact the state permitting specialist to determine those requirements
- o This permit does not certify the legal size of the lot and is not a legal determination of boundary lines.
- o If you have any questions or if I can be of further assistance, please contact me at 802-524-1500 ext *262 or s.bennett@stalbanstv.com.

City of Saint Albans • P.O. Box 867 • 100 North Main Street • Saint Albans, VT 05478
P: 802-524-1500 • F: 802-524-1505 • info@StAlbansVT.com • www.StAlbansVT.com



Property Services

April 16, 2025
Date



PERMIT NO: B25-000019

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: 04/18/2025

Location: 113 UPP WELDEN 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.


Applicants' Signature

4/18/25
Date

Permit No. B25-000019

RECEIVED

APR 04 2025

CITY OF ST. ALBANS Zoning Office



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

Applicant(s) LISA LEGRAND Daytime Phone 802 524 3033
Landowner(s) LISA LEGRAND Daytime Phone _____
Mailing Address 113 UPPER WELDEN ST. Parcel ID # 2508 7113
Parcel Address 113 UPPER WELDEN ST. Zoning District R45
Email peridewmom@gmail.com

Proposed Activity (check all that apply)

Table with 4 columns: Activity, Fee, and checkboxes. Includes categories like New Use, Accessory Use, Temporary/Seasonal Use, etc.

Table with 3 columns: Description of Proposed Activity, Fees Continued, and Amount. Includes 'ADDING A 10' X 15' LEAN TO ON THE BACK OF MY BARN'.

I certify the submitted information to be true and accurate: All fees are non-refundable, except the Construction Fee and Recording Fee for a DENIED application.
Signature of Owner: [Signature] Date: 4/2/25
Signature of Applicant: [Signature] Date: 4/2/25

APPEAL: You have the right to appeal this decision to the City of St. Albans Development Review Board within 15 days of the date of the decision (St. Albans City Land Development Regulations Sec. 905). No construction is allowed during the appeal period. If you do not appeal, this decision shall become final.
EXPIRATION: An approved permit shall expire after a period of time determined by Section 903 of the City Land Development Regulations.

FOR COMPLETION BY ADMINISTRATIVE OFFICER

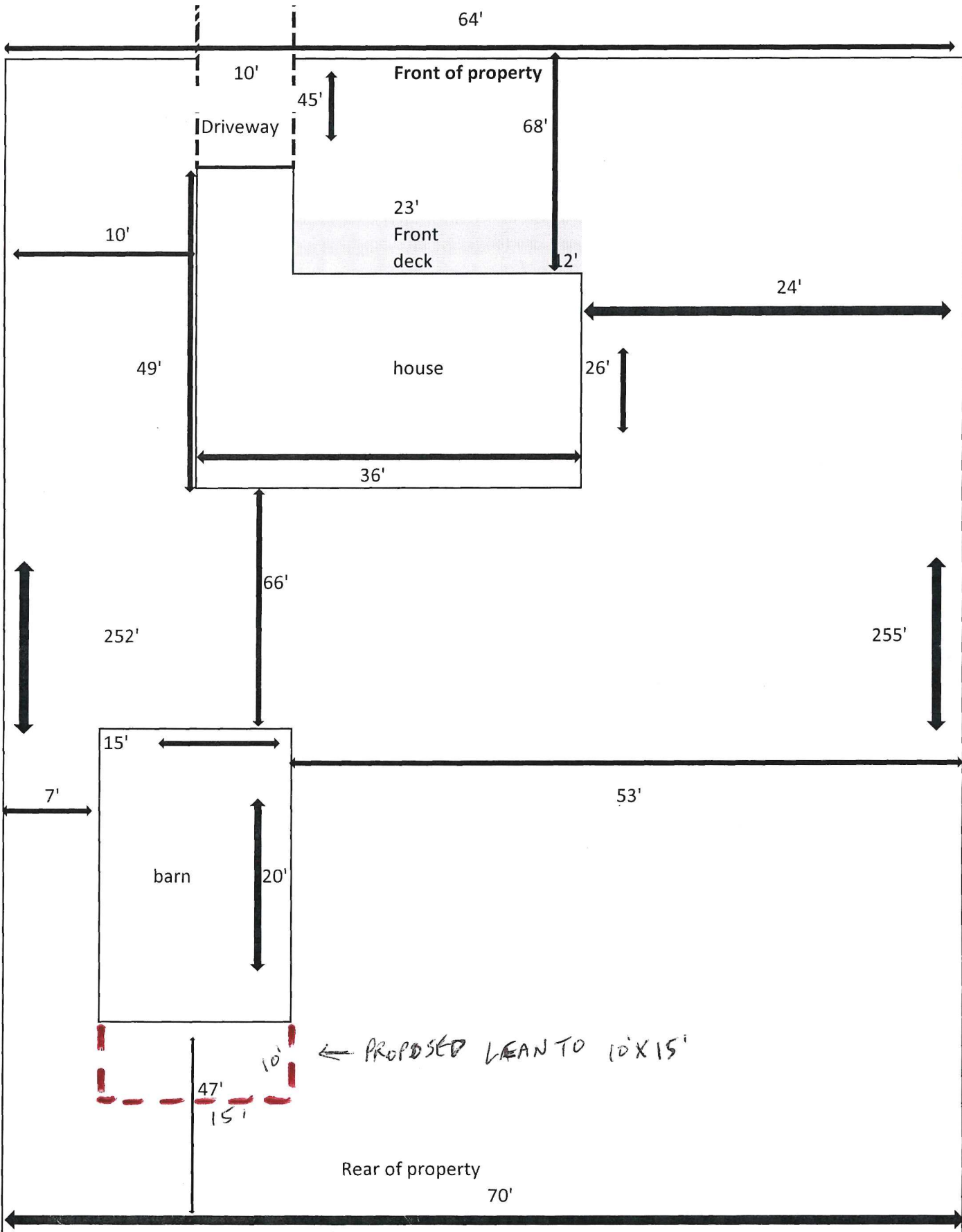
Water/Wastewater Allocation change needed: Y N PW Initial for submitted application: _____

1) Approved: 4/16/25 Posted: 4/18/25 This approval shall not become effective until 05/03/25

2) Denied: 4/16/25 Administrative Officer [Signature]

(PLEASE TURN OVER FOR ADDITIONAL INFORMATION)

Lisa LeGrand 113 Upper Welden St.
St. Albans, VT



Property Address	113 Upper Welden Street
------------------	--------------------------------

House & Porches (if applicable)		
Length	Width	SquareFootage
		0
		0
		0
		0
23	10	230
26	36	936
		0
		0
		0
		0
		0
		0
		0
		0
TOTAL		1166

LOT SIZE	Length	Width	Sqft
	252	70	17640

TOTAL COVERAGE=	12%
------------------------	------------

Driveway & Parking (if applicable)		
Length	Width	SquareFootage
45	10	450
		0
		0
		0
		0
TOTAL		450

Garage (If Applicable)		
Length	Width	SquareFootage
20	15	300
		0
TOTAL		300

Shed/Patio/Other (If Applicable)		
Length	Width	SquareFootage
10	15	150
		0
		0
		0
TOTAL		150

proposed leanto

Total Coverage (SF)	2066
----------------------------	-------------

Zone	% Coverage Allowed
R95	40%
R75	50%
BNT	40%
B1	100%
B2	70%
MI	Area remaining after required setbacks and buffer areas are met
RP	70%
S-IND	Area remaining after required setbacks and buffer areas are met

PUBLIC NOTICE

PER CITY OF ST. ALBANS LAND DEVELOPMENT REGULATIONS

Address: 113 Upper Welden St.

Applicant: LeGrand

Project Description: Add 10' x 15' Lean-To
To back of Barn

Permit / Approval

Type: B25-000019

Date Issued: 4/18/2025

Appeal by: 5/3/2025

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

