

Permit No. 20-00003

RECEIVED

OCT 05 2020

CITY OF ST. ALBANS  
Zoning Office



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

APPROVED

**Applicant(s)** City of St. Albans **Daytime Phone** 802-524-1500 ext. \*259

**Landowner(s)** Green Mountain Power **Daytime Phone** (802) 324-8359

**Mailing Address** 2154 Post Road, Rutland, VT 05701 **Parcel ID #** 26055061

**Parcel Address** 64 Lo. Welden St. **Zoning District** S-IND

**Email** c.sawyer@stalbansvt.com

**Proposed Activity (check all that apply)**

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

<sup>1</sup> After the fact <sup>2</sup> Exempt if paid as part of a DRB Hearing

Description of Proposed Activity (attach additional pages as needed)	Fees Continued:
	Total of Fees from Above:
BLA between the two parcels that make up this grand list	Residential Construction Fee - \$4.00 per \$1,000 in work cost estimate
parcel. See attached plat.	Commercial Construction fee - \$5.00 per \$1,000 in work cost estimate
	City Clerk Recording Fee (for each permit) \$15.00
	Records Management Fee (for each permit) \$12.00
<b>Cost of work: N/A</b>	<b>Total Permitting and Recording fees:</b>
<b>Expected Completion Date:</b> Closing anticipated in Dec. 2020	Check # or Cash Amt Remitted:

WAIVED

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

**Signature of Owner:** [Signature] **Date:** October 5, 2020

**Signature of Applicant:** [Signature] **Date:** October 5, 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: Oct 7, 2020 Posted: Oct 7, 2020 This approval shall not become effective until Oct 22, 2020

2) Denied: Oct 7, 2020  
Date of Action [Signature]  
Administrative Officer

(PLEASE TURN OVER FOR ADDITIONAL INFORMATION)



**PROPERTY INFORMATION FORM**

***This form is required as part of any application for DESIGN REVIEW or PUBLIC HEARING or for a PERMIT for BUILDING, CONSTRUCTION, USE or OTHER APPROVAL under the CITY OF SAINT ALBANS LAND DEVELOPMENT REGULATIONS***

I, Chip Sawyer, hereby certify as follows:

1. Property Location: 64 Lower Welden St.
2. Owners: Green Mountain Power
3. Current Uses of Property (*each dwelling counts as a single unit, ie. single family = 1 unit, duplex = 2 units, etc*):

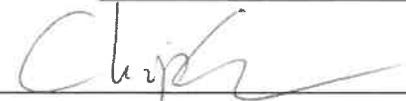
	# Units on Property	# Currently Occupied	# Currently Vacant	Please explain for how long each vacant unit has been vacant.
Dwelling Units	0			
Commercial Units	1 (substation)	1 (substation)		

4. Is this property currently being serviced by City of St. Albans water/wastewater? \_\_\_ yes X no
5. Please provide a count of the buildings and total rooms located on this property:

Number		Number		Number	
	Houses		Commercial Bldgs		Full Bathrooms
	Garages		Kitchens		Half Bathrooms
1	Sheds		Bedrooms	1	Other: Substation

6. Is any type of business being run from this property, including a home occupation? \_\_\_ yes X no

Please describe: \_\_\_\_\_

Signature:  Date: October 5, 2020

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## PERMIT LETTER

**Permit Date:** 10/07/2020

**Parcel Number:** 26055061

**Parcel Owner:** GREEN  
MOUNTAIN POWER  
CORPORATION

**Parcel Address:** 74 LO WELDEN ST St Albans City, VT  
05478

**Permit Number:** L20-000003

**Permit Type:** Borderline  
Adjustment

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### Project Summary: Boundary Line Adjustment

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**Decision:** Issued

**Conditions:**

The application and submittals for the above referenced project have been reviewed and

1. 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. and setbacks
  - a. both lots must meet all Land Development Regulations for lot size, frontage
  - b. final plat must be submitted to the Zoning Administrator and recorded with the City Clerk

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 10/07/2021 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](mailto:d.southwick@stalbansvt.com).



October 07, 2020  
Date

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### Property Services

# PUBLIC NOTICE

PER CITY OF ST. ALBANS LAND DEVELOPMENT REGULATIONS

**Address:** 74 LO WELDEN ST, St Albans City, VT 05478

**Applicant:** CITY OF ST. ALBANS / GREEN MOUNTAIN POWER COMPANY

**Project Description:** BOUNDARY LINE ADJUSTMENT

**Permit / Approval**

**Type:** L20-000003

**Date Issued:** OCTOBER 7, 2020

**Appeal by:** OCTOBER 22, 2020

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 **Public Hearing Notice**

**Date / Time:** \_\_\_\_\_

**Place:** \_\_\_\_\_

**Purpose:** \_\_\_\_\_

**FOR MORE INFORMATION, CONTACT:**

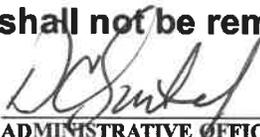
PLANNING & PERMITTING ADMINISTRATOR, CITY OF ST. ALBANS PO BOX  
867,

100 NO. MAIN ST., ST. ALBANS, VT 05478, PHONE: 802-524-1500 X \*262

EMAIL: [INFO@STALBANSVT.COM](mailto:INFO@STALBANSVT.COM)

WEB: [WWW.STALBANSVT.COM/PLANNING](http://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

  
VERMONT LAND USE  
Education & Training Collaborative



**PERMIT NO: L20-000003**

**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)**

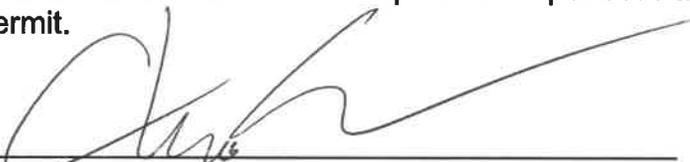
- The applicant shall post the notice of permit, on the form prescribed by the town, within view from the public right of way most nearly adjacent to the subject property, until time for appeal has passed.

**Date of Posting:** 10/7/2020

**Location:** 74 LO 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

10/7/2020  
Date