

- Contact State Permit Specialist Jeff McMahon (477-2241) to check for state permitting and/or setbacks.
- Post permit card visible to the road immediately as Permit is appealable within 15 days of issuance.
- Call the Zoning Administrator at 878-1343 to schedule a Certificate of Occupancy inspection if indicated below as required.
- Call the Assessor at 878-1345 to schedule a re-assessment upon completion of work.
- Provide a diagram showing proposal and any easements, well or septic locations, etc.

SIGN HERE: _____

A Parcel Account Numb. (Map-Parcel-Lot) 2-010-006-004
 Property Address : 43 LOST NATION RD
 Owner: BENJAMIN L JOHNSON & MELINDA M MONROE
 Owner Address: 43 LOST NATION RD
 Owner Phone: (work) 802-309-5050 (Cell) 802-598-9687
 (Email) bjohnso17@gmail.com
 Tenants name: Josh WARD Phone: _____
 (or contractor) Cell: 802-734-8181
 Estimated Construction Dates: Start: 10/15/25 Completion: 06/15/26
 Sq. Feet: 784 Estimated Cost (labor & materials): \$ 150,000

G

Check box(es) which describe proposed use or construction (circle choice in parenthesis).

N = New A = Addition R = Remodel

Residential:

Single Family	N	A	R
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Two-family (duplex)(other)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multi-family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condominium / Townhouse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobile home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inclusions or Additions:

Garage (attached) (detached)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Porch (enclosed) (open)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Deck	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pool (in) (above) ground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shed <u>remove</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Barn (residential) (agriculture)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Non-residential:

Commercial / Industrial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Stormwater:

Stormwater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Erosion Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other:

Change in use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Miscellaneous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Renewal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B Sewage Disposal (Please attach Sewer and/or State Septic Approval).
 Public Septic Connection Fee \$ _____ Date Paid: / /
 Proposed New Bedrooms: 0 Existing Bedrooms 3

C Water (Please attach Water Service Application if applicable).
 Public Well Fee \$ _____ Date Paid: / /

D Driveway (Please attach copy of approved Curbcut / Utility Application).
 Date of approval : / / n/a

E Stormwater

Project disturbs an area greater than or equal to 1 acre – Erosion Control Permit Required. Attach completed permit application.

Project creates new or expands existing impervious surface greater than or equal to 1/2 acre – Erosion Control Permit and Stormwater Management Permit required. Attach completed permit application.

n/a

F Diagram – Show a sketch of project on reverse of this application with property lines, building, and setbacks or attach separate sheet.

See attached.
Removing existing shed.
Adding new garage
Converting existing garage to living space.
 Signature of Tenant and _____
 Signature of Owner _____ No bedrooms added

Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ <u>405</u>	<u>9/18/25</u>
Recreation		\$ _____	<u> </u> / <u> </u> / <u> </u>
Recording		\$ <u>15</u>	<u>9/18/25</u>
Certificate of Occ		\$ _____	<u> </u> / <u> </u> / <u> </u>
Other		\$ _____	<u> </u> / <u> </u> / <u> </u>

Approved Building Permit Rejected Date 9/18/25

Issued to: BL Johnson + MM Monroe

Zoning Administrator: Sharon Kelley

Notes: RBS info given

C.O. Required Yes No
 (Certificate of Occupancy)



Check to
be removed.
Adding
attached
garage.