CERTIFICATE OF OCCUPANCY APPLICATION

Permit #:_____ Parcel ID: _____ Fee: \$25.00 + Applicable



For information contact the Zoning Administrative Officer at 434-2430.

Other federal, state and local permits or approvals may additionally be required, the applicant retains the duty to obtain all relevant and applicable approvals. To inquire about State permits contact the State Permit Specialist at 802-477-2241.

Application Date:	Physical Address of Property:		
Applicant Name:		Property Owner Name:	
Applicant Mailing Address:		Owner Mailing Address:	
Phone:		Phone:	
Email:		Email:	

The purpose of this permit request is to certify that the structure or use at the above location conforms to the approved plans filed with the Zoning Administrative Officer for the zoning permit referenced below and with all applicable provisions of the Richmond Zoning Regulations. No construction may be commenced or change of use made which is inconsistent with this permit.

Certificate of Occupancy Requested for the following Permits (include zoning permit numbers of previously approved permits, the permit number can be found on the top right-hand side of permit application form):

As per VSA 24 section 4449, for building projects (including new construction, additions, alterations, renovations or repairs to an existing building) a certificate shall be presented to the Zoning Administrative Officer certifying the building has been constructed in compliance with the requirements of the residential building energy standards (RBES) or the commercial building energy standards (CBES). A copy of the certificate shall also be recorded in the land records. An additional \$15 per page recording fee shall be charged for the recording of this documents.

Signatures: The undersigned hereby certifies this information to be complete and true.

Applicant Signature	Date		Property Owner Signature				Date
DO NOT WRITE BELOW THIS LINE-OFFICE USE ON	NLY-DO NOT W	RITE BELOW THIS	LINE—OFFICE U	JSE ONLY-DO NOT V	WRITE BELOW THIS	S LINE—OFFICE US	E ONLY
Application Complete Date:	_ Decision:	APPROVED	/ DENIED	/ WITHDRA	NN Recordin	g Fee:	
Comments:							
Zoning Administrative Officer signature:			Date:				
TOWN CLERK'S OFFICE Received for Record	:		A.D	At	o'clock	minutes	_M
And Recorded in Book:	р	age	_ Attest:				