PERMIT NOTICE

Address: Lot E Rue Madeline

Applicant: Robert and Penni Rose

Project Description: Remove existing sleep area wall adding space to living area.

☑ ***Permit / Approval***

Type: Permit# 2026-18

Date Issued: Novermber 10, 2026

Appeal by:

☐ ***Public Hearing***

Date / Time:

Place:

Purpose:

For more information contact:

Ken Ward
Zoning Administrator

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.**

Issued by:
Town of Readsboro
Zoning Administrator
Initials: _____ Date: 11/10/2026

Town of Readsboro

PO Box 187 / 301 Phelps Lane
Readsboro, VT 05350
Phone (802) 423-5652 * Fax (802) 423-5423
www.readsborovt.org

Office of the Zoning Administrator

Robert and Penni Rose
27 Brandford Road
North Bradford, Connecticut 06471

RE: Zoning Permit # 2026-18
Parcel ID: DHXOXOOE

November 10, 2026

Dear Robert and Penni:

I am pleased to inform you that your application for a Zoning Permit for Residential Addition/Alteration. Please find enclosed the Permit Notice which needs to be displayed on the subject property, and it needs to be clearly visible from the public road for the duration of the project.

You have 2 years to complete the project listed in the permit and please notify me when the project is completed so we can close out this permit.

Thank You,

Ken Ward

Zoning Administrator

Application/Parcel .ID#: DHOXODE
Date Received: 2026-18
Date Approved: 11/3/2026

Administrative Use Only

Permit Fees: 82.50
Check# 486 /By whom: R. Rose
Filing Fees:
Total Fees Paid: 82.50
TaxMapNumber: 05-055

ZONING PERMIT APPLICATION
TOWN OF READSBORO, VERMONT

All sections must be completed. Incomplete applications will not be considered.

1. **APPLICANT:**
Name: Robert Rose
Phone: (203) 915 7536
email address: Rosefrm@aol.com
Mailing Address:
27 Branford rd (Street) North Branford (City) Ct (State) 06471 (Zip)

2. **PROPERTY OWNER:**
Name: Robert + Penni Rose
Phone: (203) 915 7536
Mailing Address:
27 Branford rd (Street) North Branford (City) Ct (State) 06471 (Zip)

3. **PROJECT LOCATION:**
Deed - Book: _____ Page: _____
Tax Map Page: _____ Lot#: E Rue Madeline Parcel ID#: DHOXODE

4. **HOW IS THE PROPERTY USED NOW?**
Vacation home

number of dwelling units: _____
residential square feet: 650
non-residential square feet: _____
public assembly/facility square feet: _____

Please describe any accessory structures that are on the property.

5. **WHAT WORK IS PLANNED UNDER THIS PERMIT?** (New construction, addition, subdivision, installation or change of sign, change of use). **Please be specific.** Application must include dimensions, number of stories and square footage of gross floor area for all construction.

Second floor 18'X33' 2 bed and 1/2 Bath
Remove Existing Sleep area wall adding Space to Living area.

6. **PLEASE CHECK WORK BELOW THAT APPLIES:**

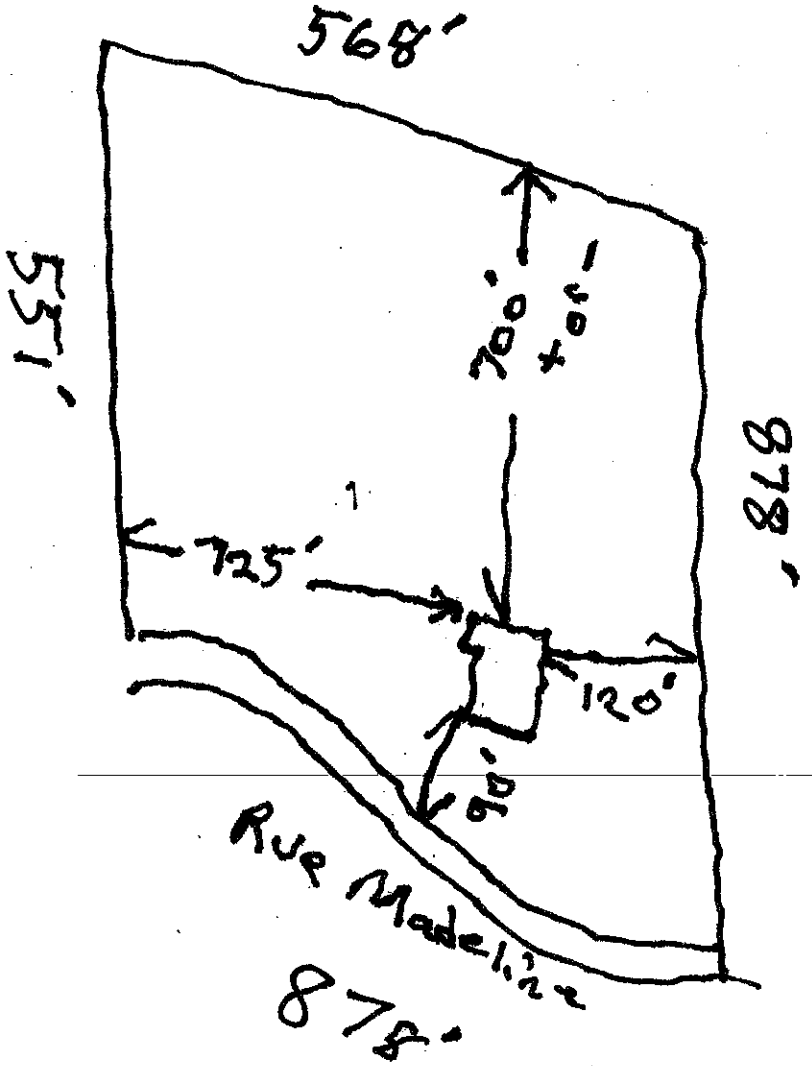
( ) Accessory structures with up to 100 square feet of floor area
( ) Accessory structures greater than 100 square feet of floor area
( ) New residential construction single dwelling unit (1 units).
( ) New residential construction duplex dwelling unit (2 units)
( ) New residential construction multi dwelling unit (3 units or more).
(✓) Residential addition/alteration/renovation.
( ) Non-residential addition/alteration/renovation.
( ) New Non-residential construction
( ) Subdivision or boundary line adjustment. For applications involving subdivision of land or a boundary line adjustment a survey plat meeting the requirements of 27 V.S.A. §1403 and the rules of the Board of Land Surveyors, stamped by a Registered Land Surveyor licensed to practice in Vermont or equivalent.
( ) Signs.
( ) Change of use: from residential to non-residential or non-residential to residential; or from one non-residential use to another non-residential use.
( ) Conditional Use - Requires Site Plan Review & public hearing with the Development Review Board.
( ) Variance request
( ) Waiver to dimensional requirements request (lot size, setbacks, road frontage)
( ) Home Occupation - Provide Zoning Administrator with description of Home Occupation in writing.

7. **ZONING INFORMATION - may be obtained with assistance from: zoning@readsborovt.org**

a. What zoning district is the property located in? Con

b. Dimensional Requirements:

	Required	Existing or Proposed	Comments
Lot Size:	5 acres	10.1 acres	
Frontage:	200'	869'	
Front Setback from Centerline of the highway	75'	90'	
Rear Setback:	40'	700'	
Left Side Setback:	40'	725' +or-	
Right Side Setback:	40'	120' +or-	



Cabin Dimensions on buildin Plans / Foot print unchanged

Town of Readsboro, Vermont, Zoning Permit Application Fee Schedule

Application Fees

Current Fee Schedule

	Base Fees		Square Footage Fees In Addition To Base Fee
Residential Building- Single dwelling unit / primitive camp - New	$ 100		$ 0.05
Residential Building- Duplex dwelling unit - New	$ 200		$ 0.05
Residential Building- multi dwelling unit - New	$ 100	per unit	$ 0.05
Residential Building -Additions / Alterations	$ 50		$ 0.05
Accessory Building - up to 100 Square feet	$ 25		$ 0.05
Accessory Building - over 100 Square feet	$ 50		$ 0.05
Non-Residential Building- New	$ 200		$ 0.05
Non-Residential Building -Additions / Alterations	$ 75		$ 0.05
Certificate of Completion (free if part of active zoning permit)	$ -		$ -
Certificate of Compliance & Site Inspection	$ 70		$ -
Change of Use Permit (Development Review Board)	$ 250		$ -
Conditional Use Permit (Development Review Board)	$ 250		$ -
Appeals to Development Review Board	$ 250		$ -
Zoning Variance - (Development Review Board)	$ 250		$ -
Waiver to Dimensional Requirements (Development Review Board	$ 250		$ -
Interpretation of Zoning ordinance or map (Development Review Board)	$ 250		$ -
Signs	$ 40		$ -
Land Subdivision	$ 250		

50
+32.50
82.50

All fees above including DRB fees will be doubled if construction has started prior to being issued a zoning permit

			$ -
			$ -
Other Permit Application Fees Schedule			
Access Permit - (Town Road Foreman/Selectboard)	$ 70		$ -
Access Permit - Recreational vehicles (Town Road Foreman/Selectboard)	$ 35		

Any application that requires the DRB requires both the permit fee to construct plus the $250 DRB fee.

Example:

A new single dwelling unit house with 2000SF of floor space that requests a waiver to the dimensional requirements as it is too close to the road.
$100 base fee + (2000 * $0.05 SF fee) = $200 permit fee to construct + $250 DRB fee = $450 total fees due.

Please note that any application that requires either a waiver & conditional use, or any other combination of two DRB items will only be charged one $250 fee.

8 SIGNATURES AND AUTHORIZATIONS :

Signing of this application authorizes the Zoning Administrator to enter onto the premises for the purpose of verifying information presented in sub section 5 on this permit application.

The undersigned hereby certifies that the information submitted in this application regarding the property is true, accurate and complete and that I (we) have full authority to request approval for the proposed use of the property and any proposed structures. I (we) understand that any permit will be issued in reliance on the above representations and will be automatically void if any are untrue or incorrect

Signature of owner(s) of property: Robert Rose Date: 9-10-26

Pam Rose Date: 9.10.26

Signatures of applicant(s) other than property owner:

_____ Date: _____

_____ Date: _____

This information must be submitted with a Site Plan (for subdivisions a survey is required that meets the standards set by the State of Vermont) if required, other required forms and an application fee. Your site plan must contain all the information listed below. **INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

No Zoning Permit Application will be accepted for any new construction without approved State of Vermont Wastewater System & Potable Water Supply Permit and a Road Access Permit for access onto State or Town Roads. Applicants are hereby notified that additional Federal, State, or Local permits may be required including but not limited to VT Dept. of Health Lodging or Food License, Wetlands, Stormwater, or ACT 250. A copy of all required permits must accompany the Zoning Permit Application. Failure of the Zoning Administrator to recognize the need for any Federal, State, or Local permits does not relieve the applicant from the requirements to obtain them.

NOTE: Failure to develop your property in accordance with your application and any conditions of this permit may result in an enforcement action and may affect your ability to sell or transfer clear title to your property.

Applicant is required to provide the names and addresses of adjoining property owners without regard to any public right of way. Information can be found at: https://next.axisgis.com/ReadsboroVT/ and is located at the Town Office.

Name:	**Mailing Address:**
John and Patricia Carr	1040 Rue Madeline, Reads boro
Jeffery May	750 Rue Madeline, Reads boro

Name:

_____

_____

_____

Mailing Address:

_____

_____

_____

_____: Agency of Natural Resources has reviewed the Property in the Flood Plain Area

Comments: _____

_____

_____

Signature: _____

Date: _____

For Administrative Use Only:

Zoning Administrator Action

Application Number: 2026-18

Date Received: _____

KW

(initial by Admin. Officer)

Amount of Fee Paid: 82.50

Date Permit Issued: 11/10/24

Ken Wa

Zoning Administrator

Development Review Board Action:

Date Received: _____

Notice of Hearing: _____

Date of Hearing: _____

Date of Decision: _____

Decision: _____

(Approved, denied, approved with conditions)

_____

DRB Chair or Clerk

The Zoning Permit shall take effect 15 days after being issued and is valid for 2 years from the date of approval