

**DEVELOPMENT REVIEW BOARD  
BRANDON, VERMONT**

<i>Town Office Use Only</i>			
<b>Town of Brandon</b>	<b>Tax Map #</b> _____	<b>Date Completed:</b> _____	
<b>49 Center Street</b>	<b>Parcel ID #</b> _____	<b>Decision:</b> _____	
<b>Brandon, Vermont 05733</b>	<b>No. of Acres</b> _____	<b>Fee \$</b> _____	<b>Check #</b> _____ <b>Rec'd by</b> _____
<b>Phone: (802) 247-3635 ext. 202</b>	<b>Zone</b> _____	<b>Deed Reference</b> _____	
<b>FAX: (802) 247-5481</b>			

**Application for a Conditional Use Permit**

Applicant: \_\_\_\_\_  
 Applicant Mailing Address: \_\_\_\_\_  
 Applicant's Phone No.: \_\_\_\_\_

Landowner (if not the applicant): \_\_\_\_\_  
 Landowner Mailing Address: \_\_\_\_\_  
 Landowner Phone No.: \_\_\_\_\_

Property Location: \_\_\_\_\_

Detailed Description of Proposed Project:

---



---



---



---



---



---



---



---



---



---

**NOTE: A fully completed Brandon Land Use Permit Application must be included with this Application for a Conditional Use Permit.**

**Signature of Applicant:** \_\_\_\_\_

**Signature of Landowner:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Comments by Administrative Officer: \_\_\_\_\_

---



---



---



---