

**Zoning Office**  
Ph: (802) 362-4571, x-5  
Fax: (802) 362-5156  
dorsetza@gmail.com  
Hours: Tues. Wed.: 11-4  
Thurs.: 1-4



**Town Offices**  
112 Mad Tom Rd  
PO Box 715  
East Dorset, VT 05253

**TOWN OF DORSET  
SIGN PERMIT APPLICATION**

The undersigned hereby requests a Sign Permit, to be issued on the basis of representations contained herein, knowing that the Permit will be voided in the event of misrepresentation.

Name of Applicant/Owner: \_\_\_\_\_ Phone: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**If applicant is not owner, provide written permission from owner to apply for sign permit.**

Applicant/Owner Mailing Address: \_\_\_\_\_

Physical Address of Sign: \_\_\_\_\_ Zoning District: \_\_\_\_\_ In Design District: Y N

Tax Map Number: Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

**Description of Proposed Sign**

Type of Sign: Flush-mounted \_\_\_\_\_ Free-standing \_\_\_\_\_ Projecting \_\_\_\_\_ Soffit \_\_\_\_\_  
One Sided \_\_\_\_\_ Two Sided \_\_\_\_\_

Size (dimensions): \_\_\_\_\_ Materials: \_\_\_\_\_

Lighting Fixtures (How Many, Type, Wattage): \_\_\_\_\_

Setback from Sidewalk: \_\_\_\_\_ Setback from Edge of Roadway: \_\_\_\_\_

Height from ground to top of sign, posts or cornice (highest point): \_\_\_\_\_

List all other signs existing of lot: \_\_\_\_\_

**This application must be accompanied by an accurate drawing of the proposed sign / associated lighting and a plot plan showing the proposed location of the sign on the building or lot.**

**Signs in the Design area require Design Review Board and subsequent Planning Commission approval prior to issuance of a permit. Color samples are required. Contact the Zoning Administrator with all questions.**

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_ Application Fee: **\$25.00**

Contact the Zoning Administrator for assistance in completing this application, 802-362-4571, X-5.

**FOR TOWN USE ONLY**

Date Received: \_\_\_\_\_ Submittal Complete: YES NO

ACTION TAKEN: Approved, Date \_\_\_\_\_ Denied, Date \_\_\_\_\_

Held for further study, applicant notified: Date \_\_\_\_\_

Referred to Design Review Board: Meeting Date \_\_\_\_\_

Sign Permit No. \_\_\_\_\_ Application Fee Paid Date \_\_\_\_\_

Reason for Denial/Hold: \_\_\_\_\_

Signed: \_\_\_\_\_ Tyler Yandow, AIA, Zoning Administrator

Comments: \_\_\_\_\_

