

**Town of West Windsor, Vermont**

*Town Offices*

*P.O. Box 6 ♦ Brownsville, Vermont 05037 ♦ Tel. (802) 484-7212 ♦ Fax (802) 484-3518*

**APPLICATION FOR CERTIFICATE OF OCCUPANCY**

Zoning Permit # \_\_\_\_\_ Date \_\_\_\_\_

Name of Landowner \_\_\_\_\_

Mailing Address of Landowner \_\_\_\_\_

Name and Mailing Address of Applicant (if different from landowner)

\_\_\_\_\_  
\_\_\_\_\_

Location of Property \_\_\_\_\_

Tax Map # \_\_\_\_\_

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For use by Administrative Officer

This certifies that the (use) (construction) permitted at the above location conforms to the approved plans heretofore filed with the Administrative Officer, and with all applicable provisions of the West Windsor Zoning Regulations and any specific permit conditions. No construction may be commenced, or change of use made, which is inconsistent with this certificate.

Signed \_\_\_\_\_

Administrative Officer

Date \_\_\_\_\_