

Town of Fletcher  
33 Shaw Road  
Cambridge, Vermont 05444

BOUNDARY LINE ADJUSTMENT

*\*Asterisk Represents Required Information*

Parcel Number\* \_\_\_\_\_

Office Use Only	
Permit Number _____	Hearing Number _____

PARCEL LOCATION INFORMATION\*

Street Number \_\_\_\_\_ Street Name \_\_\_\_\_ Apt Number \_\_\_\_\_

Other Location Information \_\_\_\_\_

PERMIT APPLICANT INFORMATION\*

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

PARCEL OWNER INFORMATION\*

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Application Date \_\_\_\_\_ Application Fee \_\_\_\_\_

Lands Records: Book # \_\_\_\_\_ Page(s) # \_\_\_\_\_

DESCRIPTION OF PERMIT

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

Is there a PLAT for this Permit: YES

☐

NO

☐

Number of Acres in Parcel \_\_\_\_\_

PROPOSED USE

\_\_\_\_\_

Signature(s) of Land Owner(s)

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_