Fee $

Town of Braintree, Vermont

Application for

CERTIFICATE OF OCCUPANCY (C.O.)

Return this form upon completion of the work authorized by the zoning permit to:
Zoning Administrator, Town of Braintree, 932 VT Route 12A, Braintree, VT 05060
Failure to receive a certifcate of occupancy may affect your ability to sell or refinance your property.

Parcel Number ☐☐ - ☐☐☐ . ☐☐☐ **Zoning Permit No. ZP25-** ☐☐ ☐☐

Street Address of Property _____

Name of Property Owner _____

Mailing Address _____

Name of Permittee and/or Applicant (if not property owner) _____

Mailing Address _____

Name and phone no. of contact if Zon. Admin. has questions _____

_____

To whom should the CO be mailed? ☐ Prop. Owner ☐ Permittee ☐ Other (incl. name & address)

_____

Will the structure be heated or cooled? ☐ No ☐ Yes (Energy Code Certificate required)

A state Energy Code Certificate (or Owner/Builder Disclosure Statement) must be filed in the town land records for any structure that will be heated or cooled before a Certificate of Occupany can be issued.

A copy of the Vermont Residential Energy Code Handbook can be downloaded at:
http://publicservice.vermont.gov/topics/energy_efficiency/rbes

Brief description of work authorized by the permit _____

_____

_____

Were there any modifications to the work? ☐ No ☐ Yes (describe) _____

_____

_____

CERTIFICATION OF PROPERTY OWNER

I hereby certify that the information on this application is accurate and the person making the request for the CO, if not myself, has my permission to do so. Further, I understand that I will not be receiving a copy of the CO if so indicated above.

_____ _____

Signature of property owner *Date*