

Appeal Period Expires 7/16/21
 Zoning District R2
 Town of Essex, Vermont
Application for Zoning Permit
 (Building Permit)
 Application Date 7/1/21
 Permit Number 2021-134

- Contact State Permit Specialist Jeff McMahon (477-2241) to check for state permitting and/or setbacks
 - Post permit card visible to the road immediately upon issuance
 - Permit is appealable within 15 days of issuance
 - Call 878-1343 to schedule a Certificate of Occupancy inspection if indicated below as required
- Signed: Kursten Lamendola

Parcel Account Numb. (Map-Parcel-Lot) 2-038-008-402
 Property Address: 7 Saxon Hollow Road, Unit D2, Essex VT 05452
 Owner: Kursten Lamendola
 Owner Address: 7 Saxon Hollow Road, Unit D2, Essex VT 05452
 Owner Phone: (work) _____ (home) _____
 (cell) 315427 4158 (Email) kursten913@gmail.com
 Tenants name: n/a Phone: _____ Cell: _____
 Estimated Construction Dates: Start 7/1/21 / 1991 Completion 7/1/21 / 1991
 Sq Feet n/a no added sq ft Estimated Cost (labor & materials): \$0.00
walls and closet all pre-existing

G

Check box(es) which describe proposed use or construction (circle choice in parenthesis)
 N = New A = Addition R = Remodel

Residential	N	A	R
Single Family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two-family (duplex)(other)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multi-family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condominium / Townhouse	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mobile home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inclusions or Additions:			
Garage (attached) (detached)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Porch (enclosed) (open)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Deck	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pool (in) (above) ground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Barn (residential) (agriculture)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-residential:			
Commercial / Industrial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stormwater:			
Stormwater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Erosion Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:			
Change in use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Miscellaneous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Renewal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B Sewage Disposal (Please attach Sewer or Septic Application).
 Public Septic Connection Fee \$ _____ Date Paid: 7/1/21
 Proposed New Bedrooms: 1 Existing Bedrooms 2

C Water (Please attach Water Service Application)
 Public Well Fee \$ _____ Date Paid: 7/1/21

D Driveway (Please attach copy of approved Curbcut / Utility Application).
 Date of approval 7/1/21

E Stormwater
 Project disturbs an area greater than or equal to 1 acre – Erosion Control Permit Required. Attach completed permit application.
 Project creates new or expands existing impervious surface greater than or equal to 1/2 acre – Erosion Control Permit and Stormwater Management Permit required. Attach completed permit application.

F Diagram – Show a sketch of project on reverse of this application with property lines, building, and setbacks or attach separate sheet

G
bedroom added.
 Signature of Tenant and Signature of Owner Kursten Lamendola

Office Use Only

Fees	Type	Amount	Date Pd
Permit		\$ <u>50</u>	<u>7/1/21</u>
Recreation		\$ _____	
Recording		\$ <u>15</u>	<u>7/1/21</u>
Certificate of Occ		\$ _____	
Other		\$ _____	

Approved Building Permit 7/1/21
 Rejected Date _____
 Issued to K. Lamendola
 Zoning Administrator Shawn F. Kelley
 Notes: _____
 CO Required Yes No

THIS PERMIT VALID FOR TWELVE (12) MONTHS FROM DATE OF ISSUE
 RENEW FOR 1 YEAR (FREE) IF NOT EXPIRED

F Diagram – Provide diagram here and include all setbacks UPSTAIRS of UNIT

