

Appeal Period Expires 1/19/2021
 Zoning District C1

Town of Essex, Vermont
Application for Zoning Permit
 www.essex.org

Application Date 01/04/2021
 Permit Number 2020-3

All construction is to be completed in accordance with the Town of Essex Zoning Regulations and any/all federal or state regulations now in effect. You are required to post this permit in a conspicuous location on the property during the appeal period and it must remain posted throughout the construction period. You are required to contact the necessary state agencies to obtain state permits @ 477-2241 (Jeff McMahon, Permit Specialist).

Any interested person may appeal the decision of the Zoning Administrator to the Zoning Board of Adjustment within fifteen (15) days of the permit's date of issuance. Commencing construction within this fifteen (15) day appeal period is prohibited by law.

Signed: informed verbally + email

A Parcel Account Num. (Map-Parcel-Lot) 2-015-019-004
 (found in Town Assessor's Office)
 Property Address: 164 OSBODD HILL ROAD
 Owner: KENT & PATRICIA KOPTIUCH
 Owner Address: 164 OSBODD HILL RD ESSEX VT
 Owner Phone: (work) 802 878 9757 (home) 802 878 9757
 (cell) 802 233 4423 (Email) kskgeas@aol.com
 Contractors name: SELF Phone: 802 878 9757
 Cell: 802 233 4423
 Estimated Construction Dates: Start: 01/31/21 Completion: 02/28/21
 Sq. Feet: 475 Estimated Cost (labor & materials): \$3,000

G			
Check box(es) which describe proposed use or construction (circle choice in parenthesis).			
N = New (A) Addition R = Remodel			
Residential:			
Single Family	N	A	R
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 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 checked="" 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). N/A
 Public Private Connection Fee \$ _____ Date Paid: 1/1/
 Proposed New Bedrooms: _____ Existing Bedrooms _____

C Water (Please attach Water Service Application). N/A
 Public Private Fee \$ _____ Date Paid: 1/1/

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

E Stormwater N/A
 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 NEW DECK & STAIRS ON EAST SIDE OF HOUSE
 Signature of Tenant and Signature of Owner [Signature]

Office Use Only			
Fees:	Type	Amount	Date Pd
Permit		\$ <u>50</u>	<u>1/1/21</u>
Recreation		\$ _____	<u>1/4/21</u>
Recording		\$ <u>15</u>	<u>1/1/21</u>
Certificate of Occ		\$ _____	<u>1/1/21</u>
Other		\$ _____	<u>1/1/21</u>

Building Permit
 Approved Rejected Date 1/4/21

Issued to: K + P Koptiuch

Zoning Administrator: Sharon L. Kelly

Notes: _____

C.O. Required Yes No

THIS PERMIT VALID FOR TWELVE (12) MONTHS FROM DATE OF ISSUE

F Diagram – Provide diagram here and include all setbacks

