

Appeal Period Expires 8,19,21
 Zoning District B1

Town of Essex, Vermont
Application for Zoning Permit
 (Building Permit)

Application Date 1/1
 Permit Number 2021-150

- 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:

A Parcel Account Numb. (Map-Parcel-Lot) 2-047-007-001
Style Works Hair Studio
 Property Address: 4 Kellogg Rd Essex Jct VT 05452
 Owner: Heco Rentals LLC (Ken Heco)
 Owner Address: (Info on File)
 Owner Phone: (work) _____ (home) _____
 (cell) _____ (Email) _____
 Tenants name: Heather Stygles Phone: (800)
 Cell: 238-8721
 Estimated Construction Dates: Start: 1/1 Completion: 1/1
 Sq. Feet: 975 Estimated Cost (labor & materials): \$ _____

G

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

<i>Residential:</i>	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 type="checkbox"/>
Mobile home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Inclusions or Additions:</i>			
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"/>
<i>Non-residential:</i>			
Commercial / Industrial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Stormwater:</i>			
Stormwater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Erosion Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Other:</i>			
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"/>

operator 2 chair hair salon includes new ownership signposting to replace old sign

B Sewage Disposal (Please attach Sewer or Septic Application). 1 salon chair
 Public Septic Connection Fee \$ 525 Date Paid: 1/1
 Proposed New Bedrooms: _____ Existing Bedrooms Existing
adding 1 chair for 1 chair

C Water (Please attach Water Service Application).
 Public Well Fee \$ 280 Date Paid: Existing
Adding 1 chair for 1 chair

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

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.
N/A

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

G see other side
 Signature of Tenant and Signature of Owner Heather Stygles

Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ <u>85.-</u>	<u>1/1</u>
Recreation		\$ _____	
Recording		\$ <u>15.-</u>	<u>7/30/21</u>
Certificate of Occ		\$ _____	<u>1/1</u>
Other		\$ <u>204.</u>	<u>1/1</u>

water/sewer

Approved Rejected Date: 8,2,21
 Issued to: Heco Rentals LLC
 Zoning Administrator: Shawn L. Kelly
 Notes: NO fit-up needed

C.O. Required Yes No

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

#2021-150

Town of Essex
Application for Sewer Service

Revised April 2016

The undersigned, being the owner / owner's agent of the property located at:

Street Address: 4 Kellogg Rd Development: B1 Zone
Tax Map # 047 Tax Parcel 007 Tax Lot 001

Does hereby request a permit to install and connect a building sewer to
serve _____ unit(s) Residential Commercial Industrial structure

Installer / Contractor:

Property Owner:

Name: _____

Name: Heco Rentals LLC

Address: _____

Address: 79 Old Stage Rd

Phone: _____

Phone: _____

Cell: _____

Cell: _____

The owner / agent agrees:

- a) That all work shall be in accordance with the Town Sewer Ordinance, the Town Public Works Specifications, and all other pertinent ordinances or regulations of the Town of Essex.
- b) To install and maintain the private building sewer at no expense to the Town.
- c) To notify the Public Works Office twenty four hours prior to the start of construction for inspection purposes. No part of the sewer line may be covered until it has been inspected by the Town Representative.
- d) To pay the sewer charges (construction and operations) which are billed as set forth in the water/sewer fee schedule.

Signed: _____

Heather Stygles
(Signature of Owner / Agent)

Date: 7-29-21

PLEASE MAKE CHECK PAYABLE TO TOWN OF ESSEX WATER AND SEWER DEPARTMENT AND RETURN ALONG WITH APPLICATION TO THE COMMUNITY DEVELOPMENT OFFICE. DO NOT COMBINE WITH ZONING PERMIT FEE.

For Office Use Only

50 gallons / day x \$10.30 = \$ 515. + \$1,000 = \$ 515.-

Received by: [Signature]

Date: 7-29-21

Approved by: _____

Date: ____-____-____

Letter Sent

Finance Notified

Inspected by: _____

Date: ____-____-____

Tie Drawing

Finance Notified

Master List Updated:

Approved

Inspected

Town of Essex
Application for Water Service

#2021-150

Revised May 2021

The undersigned, being the owner / owner's agent of the property located at:

Street Address: 4 Kellogg Rd Development: Unit # 7

Tax Map # 047 Tax Parcel 007 Tax Lot 001

Does hereby request a permit to initiate water service as noted below to

serve _____ unit(s) Residential Commercial Industrial structure

Installer / Contractor:

Name: existing

Address: _____

Phone: _____

Cell: _____

Property Owner:

Name: Ken Heco

Address: Old Stage Rd

Phone: _____

Cell: _____

Firm Performing Main Line Tap:

Name: existing

Address: _____

Phone: _____

Cell: _____

- 1.) The above requested service includes the installation of a 3/4" x 5/8" water meter for residential use and up to a 2" simple meter for non-residential use. The information necessary to determine the correct meter size shall be supplied by the applicant (minimum to maximum range of use). Meters 5/8", 3/4" and 1" shall be installed by the Town. Meters above 1" shall be installed by the owner/applicant or qualified representative.
- 2.) Property owner / agent is responsible for and must provide all necessary excavation from the main to the building or structure.
- 3.) Property owner / agent agrees to provide the Town a minimum of 24 hours notice prior to installation for inspection purposes. No part of the water line may be covered until it has been inspected by the Town Representative.
- 4.) Property owner / agent agrees to restore all disturbed areas to original condition after the installation of said water service.
- 5.) The water service can be turned on only by an employee of the Town of Essex Water Department.
- 6.) Meter spacers must be obtained from the Town of Essex Water Department.
- 7.) The owner / agent agrees that all installation and work will conform to the Town Public Works Specifications and the Water Ordinance and Regulations of the Town of Essex.

8.) In consideration of water service supplied by the Town of Essex Water Department, I agree to be responsible for payment of all bills rendered and for all water used by me, my tenants, successors in tenancy or in ownership, and all persons at above locations, unless and until proper notice is given to the Town Water Department of termination of service on a specific date. I also agree to abide by all rules and regulations established by the Essex Water Department.

Signed: ~~AS~~ Heather Stygles Date: ____-____-____

PLEASE MAKE CHECK PAYABLE TO TOWN OF ESSEX WATER AND SEWER DEPARTMENT.
DO NOT COMBINE WITH ZONING PERMIT FEE.

All water services are subject to a service initiation fee as set by the Water/Sewer Fee Schedule adopted by the Selectboard. The following fee schedule shall apply to all municipal water connections:

FOR OFFICE USE ONLY:

50 gallons/day x \$ 5.78 = \$ 289 + \$1,000 = \$ ~~1,289~~ 289.

Connection Fee: \$ 289 Rcvd by: SK Date: 7-29-21 Finance Notified

Approved by: _____ Date: ____-____-____ Letter Sent Finance Notified

Inspected by: _____ Date: ____-____-____ Tie Drawing Finance Notified

Meter Installed Date: ____-____-____

Master List Updated: Approved Inspected Metered

515
+289

\$ 804

Heather Stygles
837 Old Stage Road
Essex Junction, VT 05452

106

50-361/213

7/29/21

Date

Pay to the
Order of Town of Essex Water & Sewer Dept. \$ 804-

Eight Hundred and Four 00/100 Dollars



Security
Features
Details on
Back

NBT BANK

For STYLE WORKS HAIR STUDIO

Heather Stygles

MP

00213

18511 0106

Traveler Paradise Bradford F