

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: Sally A Fleury

A

Parcel Account Number (Map-Parcel-Lot) 2-058-001-000
 (found in Town Assessor's Office)

Property Address: 108 Center Rd

Owner: Tower's Trust Sally + Linda Fleury + Shawn
Trustees Bedard

Owner Address: 18 Towers Rd

Owner Phone: cell 238-5017-sally (home) _____
(work) 318-0348-Linda (Email) sally_fleury@hotmail.com

Contractors name: TBD Phone: _____ Cell: _____

Estimated Construction Dates: Start: 7/13/20 Completion: 7/1/21

Sq. Feet: 3,000 Estimated Cost (labor & materials): \$300,000

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 checked="" 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"/>
Inclusions or Additions:			
Garage (attached) (detached)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Porch (enclosed) (open)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Deck	<input checked="" 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 Private Connection Fee \$3000 Date Paid: 7/1/20

Proposed New Bedrooms: 3 Existing Bedrooms _____

C

Water (Please attach Water Service Application).

Public Private Fee \$ 2146 Date Paid: 7/1/20

D

Driveway (Please attach copy of approved Curbside Utility Application).

Date of approval 5/16/2020 existing driveway see attached

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

Convert existing 36' x 36' 2 story barn into a single family home, plus add on a 24' x 48' addition.
meets setbacks

Signature of Tenant and Signature of Owner: Sally A Fleury

Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ <u>750.00</u>	<u>1/1</u>
Recreation		\$ <u>628</u>	<u>1/1</u>
Recording		\$ <u>30</u>	<u>1/1</u>
Certificate of Occ		\$ <u>75</u>	<u>1/1</u>
Other		\$ _____	<u>1/1</u>

Building Permit

Approved Rejected Date 7/1/20

Issued to: Tower's Trust

Zoning Administrator: Sharon Kelley

Notes: Energy info given

C.O. Required Yes No

**TOWN OF ESSEX, VERMONT
APPLICATION FOR CURB CUT / UTILITY PERMIT**

Pursuant to Title 19 V.S.A. Section 43. Application for curb cut and Utility Installation in Town Right-of-Way

All applications for curb cuts and utility installations shall be submitted to the Director of Public Works / Town Engineer for review. Applicants shall submit the information requested on this form and any additional information requested by the Director of Public Works / Town Engineer for a clear understanding of this application. The permit is issued under authority of the Town Manager in accordance with Section 601 of the Town Charter and 24 V.S.A. paragraph 1236 (2).

Application No. _____ Date 15.6.2020

Property Address: 24 Toweris Road

(Tax Map Address)
is 108 Center Rd

Owner Address: 18 Toweris Road

Owner Name: Toweris Trust

Phone Number: (home) 238-5012 (work) 391-7273 (cell) 318-0348

Tax Map # 058 Tax Parcel 001 Tax Lot 000 SALLY.FLEURY@GLOBALFLEXURES.COM

Application is for: (check one)

A) New Curb Cut B) Utility Installation: Overhead Underground

Please use attached diagram to describe location and type of installation.

Comments by Director of Public Works / Town Engineer:

Culvert: Yes No (CPEP) Water Bar(s): Yes No

Culvert Diameter: (18 inch minimum) 18" Total length of Culvert: (30 foot minimum) _____

*** FOR OFFICE USE ONLY ***

Signature of Owner:

Sally A. Fleury

Fee Paid \$ NA

Approved Rejected

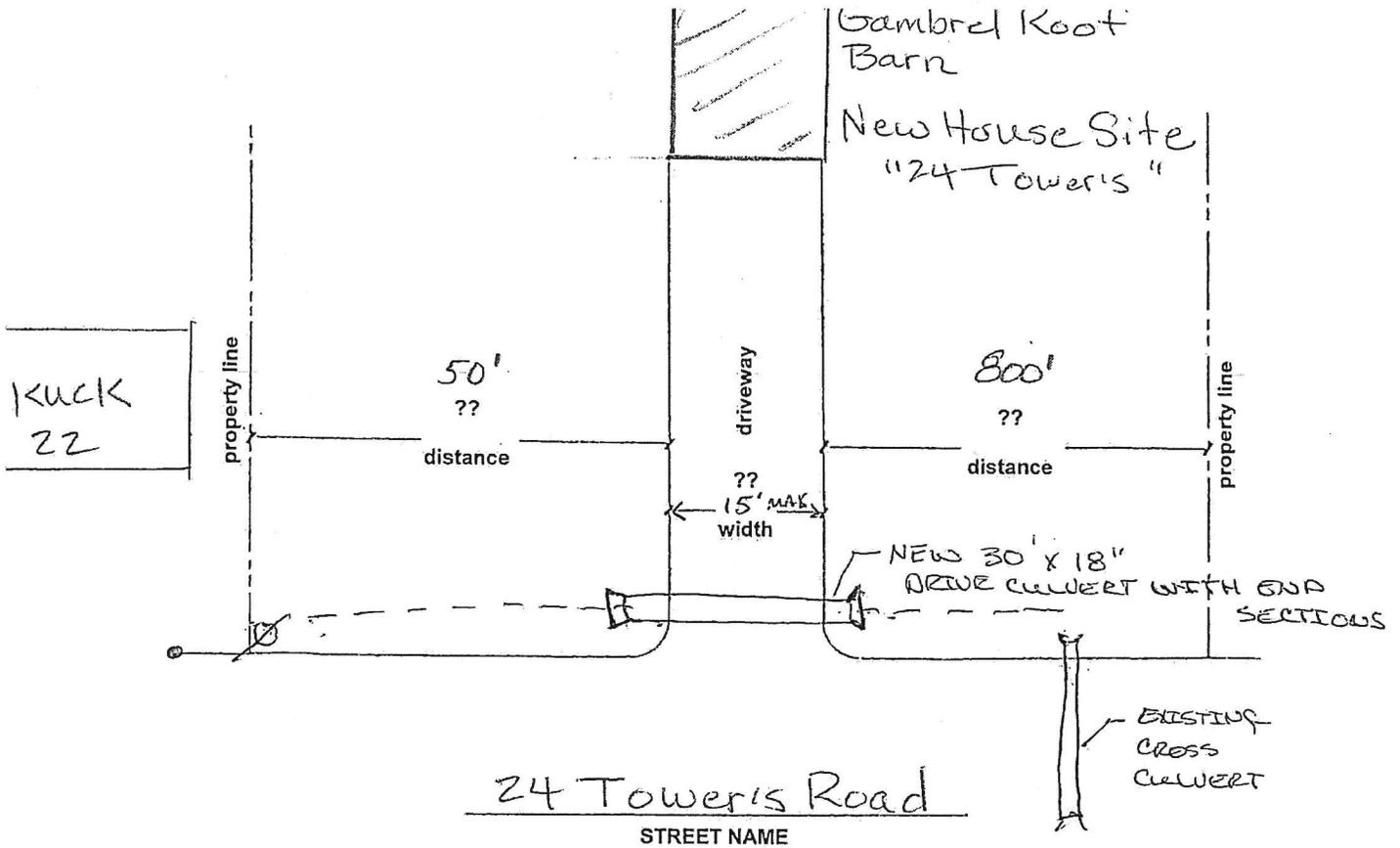
* WITH COPIES ATTACHED

Daniel Hojaie

Per Authority of the Town Manager by the
Director of Public Works / Town Engineer

1. Culvert must be HIGH DENSITY POLYETHYLENE (HDPE) PIPE
2. Culvert will be purchased by the Applicant
3. Culvert will be purchased and installed by the applicant. The Town of Essex Department of Public Works will inspect.

Note: A MINIMUM OF 24 HOURS NOTICE IS REQUIRED PRIOR TO COMMENCEMENT OF CONSTRUCTION. WITHIN 24 HOURS OF COMPLETION, THE APPLICANT IS REQUIRED TO NOTIFY THE DIRECTOR OF PUBLIC WORKS / TOWN ENGINEER FOR INSPECTION PURPOSES.

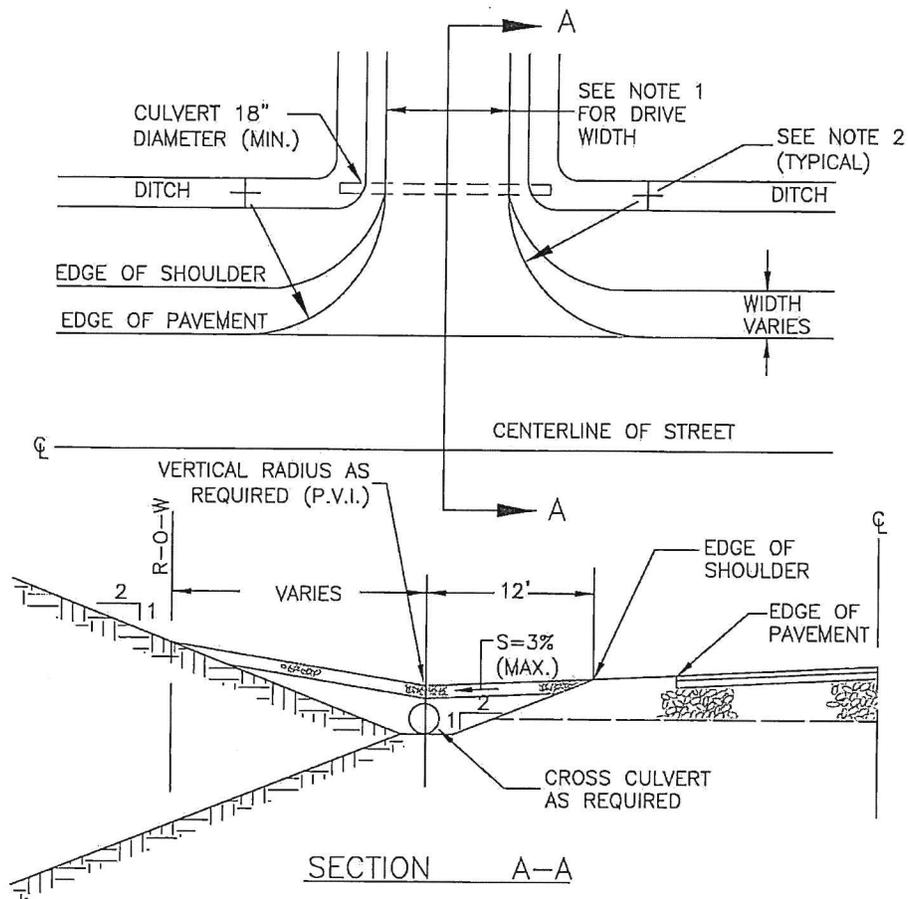


Comments and / or special instructions from Director of Public Works / Town Engineer :

- REESTABLISH DITCHLINE ALONG FRONTAGE TO FLOW INTO EXISTING CROSS CULVERT
- INSTALL NEW CPEP(SL) 30' X 18" DRIVE CULVERT
- MAX DRIVE WIDTH AT R.O.W LINE = 15 ft.
- NEW DRIVE TO SLOPE AWAY FROM ROAD ~ 3%
- SEE ATTACHED DETAIL

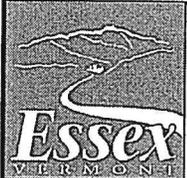
David J. [Signature]

NOTE: A MINIMUM OF 24 HOURS IS REQUIRED PRIOR TO COMMENCEMENT OF CONSTRUCTION. WITHIN 24 HOURS OF COMPLETION, THE APPLICANT IS REQUIRED TO NOTIFY THE DIRECTOR OF PUBLIC WORKS / TOWN ENGINEER FOR INSPECTION PURPOSES.



NOTES :

- 1) DRIVE WIDTHS SHALL BE AS FOLLOWS
 SINGLE DRIVE: 10 FEET (MIN.)
 DOUBLE DRIVE: 15 FEET (MAX.)
 COMMERCIAL DRIVE: 40 FEET (MAX.)
- 2) EDGE OF PAVEMENT RADII
 MAJOR / COLLECTOR ROAD: 30 FEET
 MINOR ROAD / DEAD END: 25 FEET
 COMMERCIAL / INDUSTRIAL: 30 FEET (MIN.)
- 3) MAXIMUM DRIVE GRADE SHALL BE 3%
 FROM PVI TO EDGE OF SHOULDER



TOWN OF ESSEX
 PUBLIC WORKS
 81 MAIN STREET
 ESSEX JCT., VT
 05452
 P: 802 878-1344
 F: 802 878-1355
 E: www.essex.org

TOWN OF ESSEX, VERMONT
 STANDARD SPECIFICATIONS FOR CONSTRUCTION

RURAL DRIVEWAY

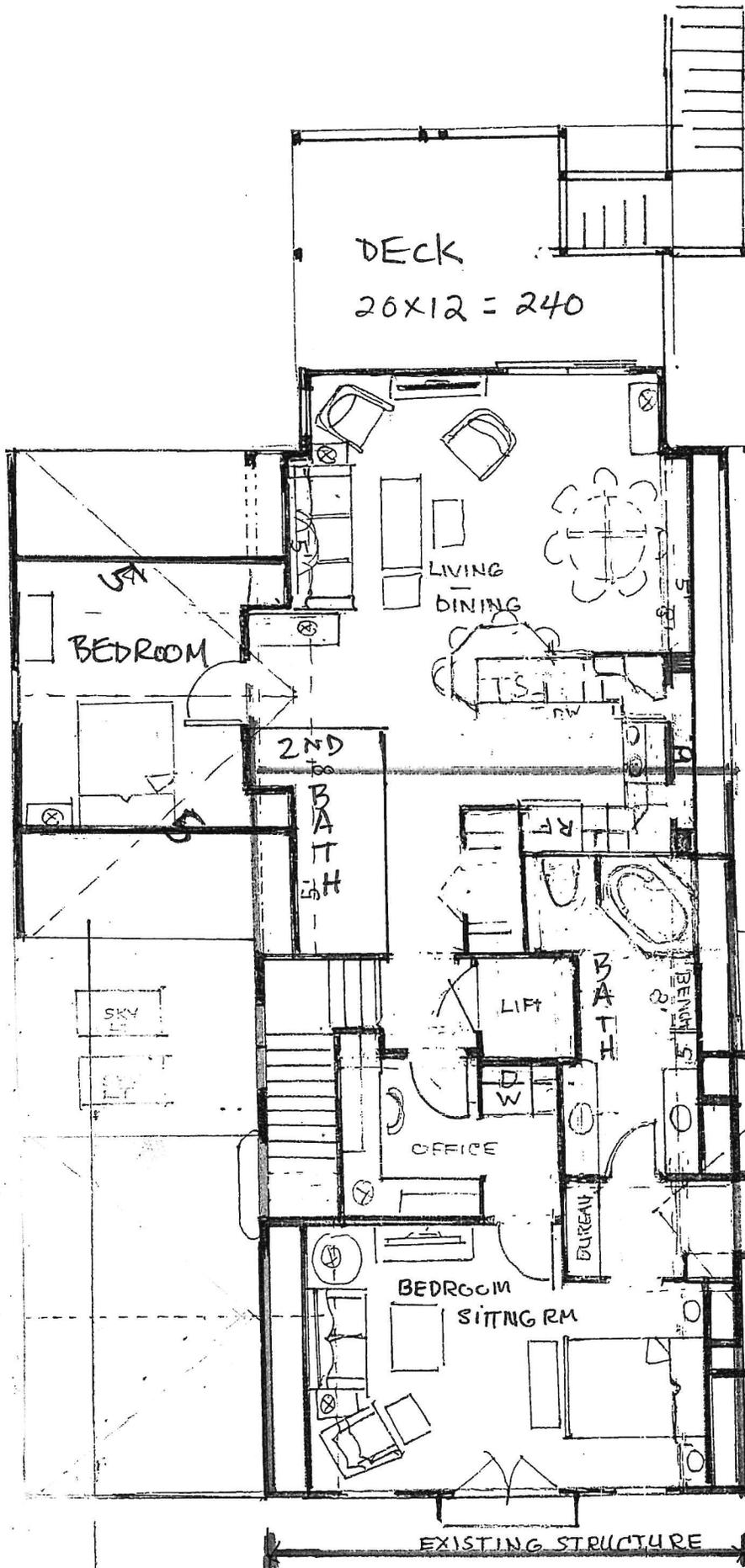
Detail No: 100.09
 Scale: NOT TO SCALE
 Date: JAN. 2017

A-9

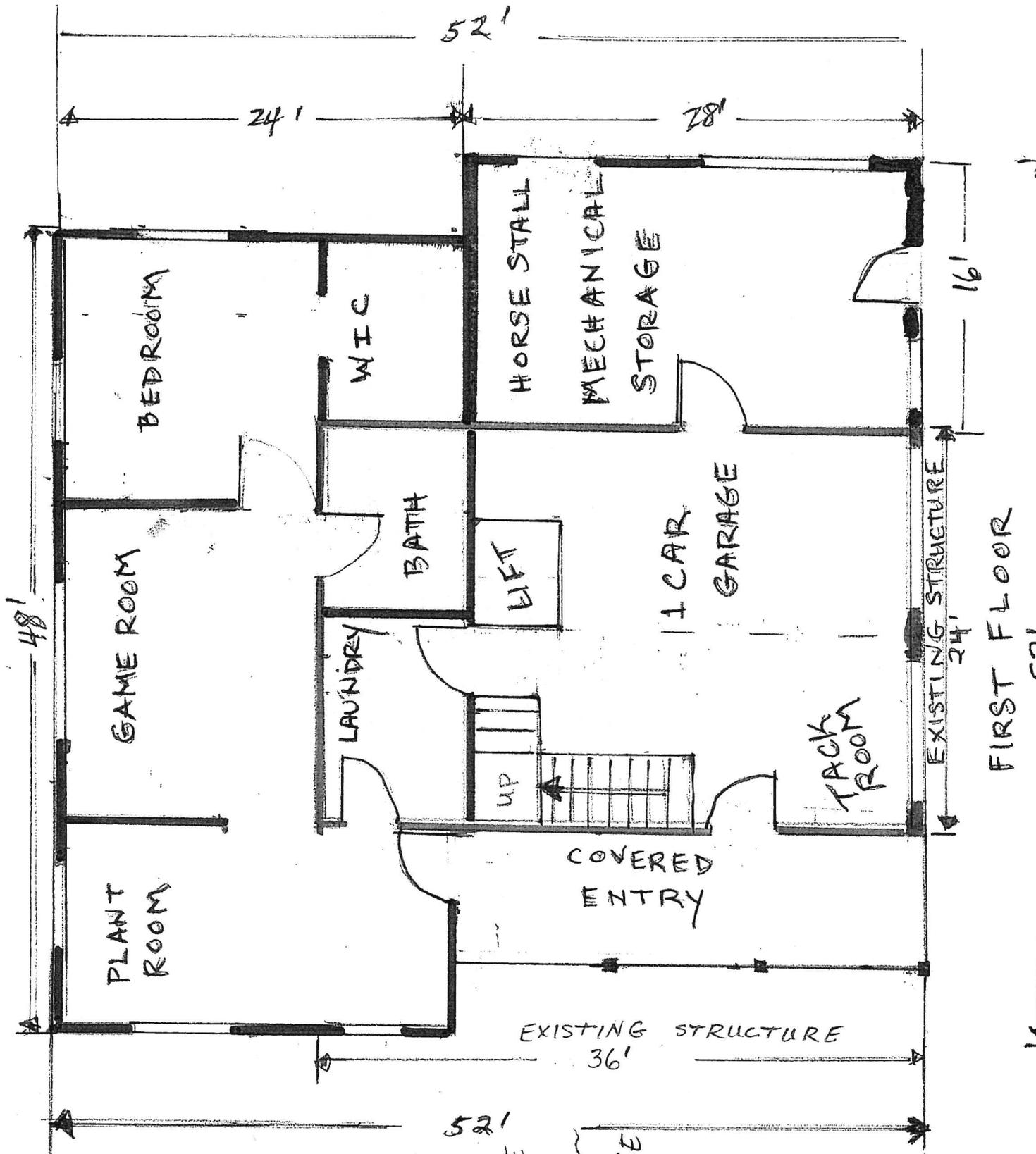
© By Windy Meadow Design
 For the Helmy Family
 January 2020

Preliminary Plan A - The
 Scale 1/8" = 1'
 Paula M. Duke, Designer

SECOND FLOOR



SECOND FLOOR PLAN



FIRST FLOOR
BEDROOM
BATH

EXISTING STRUCTURE
24x36 = 864

ADDED
NEW LIVING SPACE

10x24 = 240

NEW GARAGE SPACE
6x28 = 168

TOTAL LIVING SPACE
1152

TOTAL STORAGE/
GARAGE SPACE
1120

COVERED ENTRY
224

FIRST FLOOR

last revision: February 2019

Original (24"x36") Scale: 1 inch = 150 feet

0 75 150 Feet

"The information depicted here is approximate only and is not to be used for legal conveyances"



Tax Map 58
Town of Essex, Vt.

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: 24 Tower's Rd Development: _____

Tax Map # 058 Tax Parcel 001 Tax Lot 000

Does hereby request a permit to install and connect a building sewer to

serve ~~1~~ 1 unit(s) Residential Commercial Industrial structure

Installer / Contractor:

Name: Alan Ward

Address: _____

Phone: 793-1920

Cell: _____

Property Owner:

Name: Tower's Trust Sally + Linda Fleury

Address: 18 Tower's Rd

Phone: 238-5012 318-0348

Cell: 391-7273

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: Sally A. Fleury
(Signature of Owner / Agent)

Date: 05-06-20

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

200 gallons / day x \$10.30 = \$ 2,060 + \$ 1,000 = \$ 3,060

Received by: _____ Date: ____-____-____

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

Revised April 2016

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

Street Address: _____ Development: _____

Tax Map # 058 Tax Parcel 001 Tax Lot 000

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

serve _____ unit(s) Residential Commercial Industrial structure

Installer / Contractor:

Property Owner:

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Cell: _____

Cell: _____

Firm Performing Main Line Tap:

Name: _____

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 form 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: Sally A Flenny Date: 06-25-20

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:

200 gallons/day x \$ 5.73 = \$ 1,146 + \$1,000 = \$ 2,146

Connection Fee: \$ _____ Rcvd by: _____ Date: ____-____-____ 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