

Appeal Period Expires 8/5/20 Town of Essex, Vermont Application Date 7/13/2020
 Zoning District C1 Application for Zoning Permit Permit Number 2020-135
 www.essex.org

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: _____

A Parcel Account Num. (Map-Parcel-Lot) 2-016-015-001
 (found in Town Assessor's Office)
 Property Address: 87 Sawmill Rd Essex VT
 Owner: John C DeWitt + Chelsea Carman 05475
 Owner Address: 87 Sawmill Rd Jericho VT 05452
 Owner Phone: (work) _____ (home) _____
 (cell) 802 233 5849 (Email) jcdewitt@comcast.net
 Contractors name: Timothy Morris Phone: _____
 Cell: 802 473 8998
 Estimated Construction Dates: Start: 7/30/20 Completion: 9/30/20
 Sq. Feet: 300 Estimated Cost (labor & materials): \$ 2,060.00

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 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"/>
<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"/>

B Sewage Disposal (Please attach Sewer or Septic Application).
 Public Private Connection Fee \$ _____ Date Paid: N/A
 Proposed New Bedrooms: _____ Existing Bedrooms: N/A

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

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

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 Signature of Tenant and Signature of Owner see attached

Office Use Only

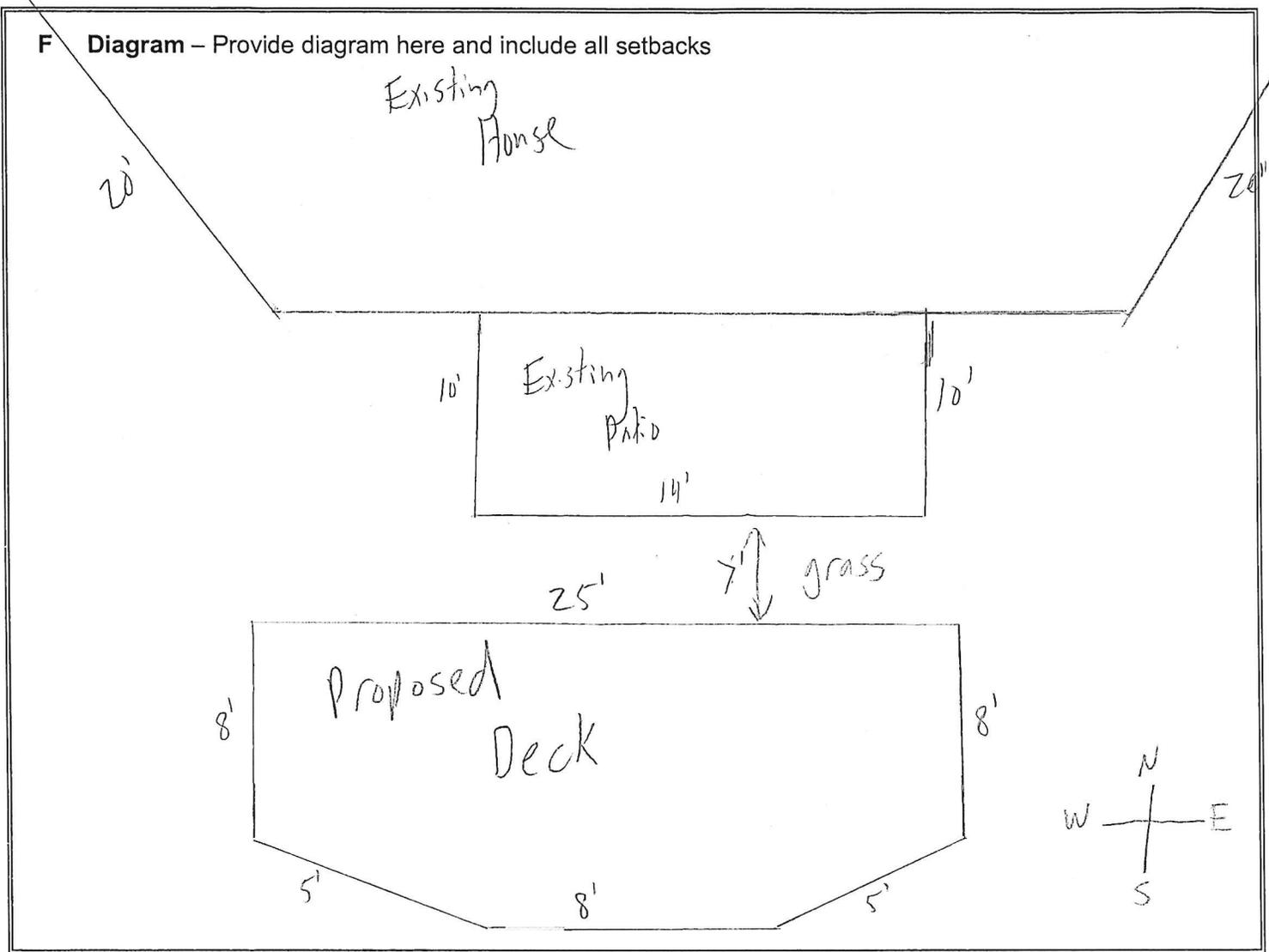
Fees:	Type	Amount	Date Pd
Permit		\$ <u>50-</u>	
Recreation		\$ _____	
Recording		\$ <u>15-</u>	<u>7/20/20</u>
Certificate of Occ		\$ _____	
Other		\$ _____	

Building Permit Approved Rejected Date 7/21/20
 Issued to: J. + C. Carman
 Zoning Administrator: Sharon L Kelly
 Notes: _____
 C.O. Required Yes No

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

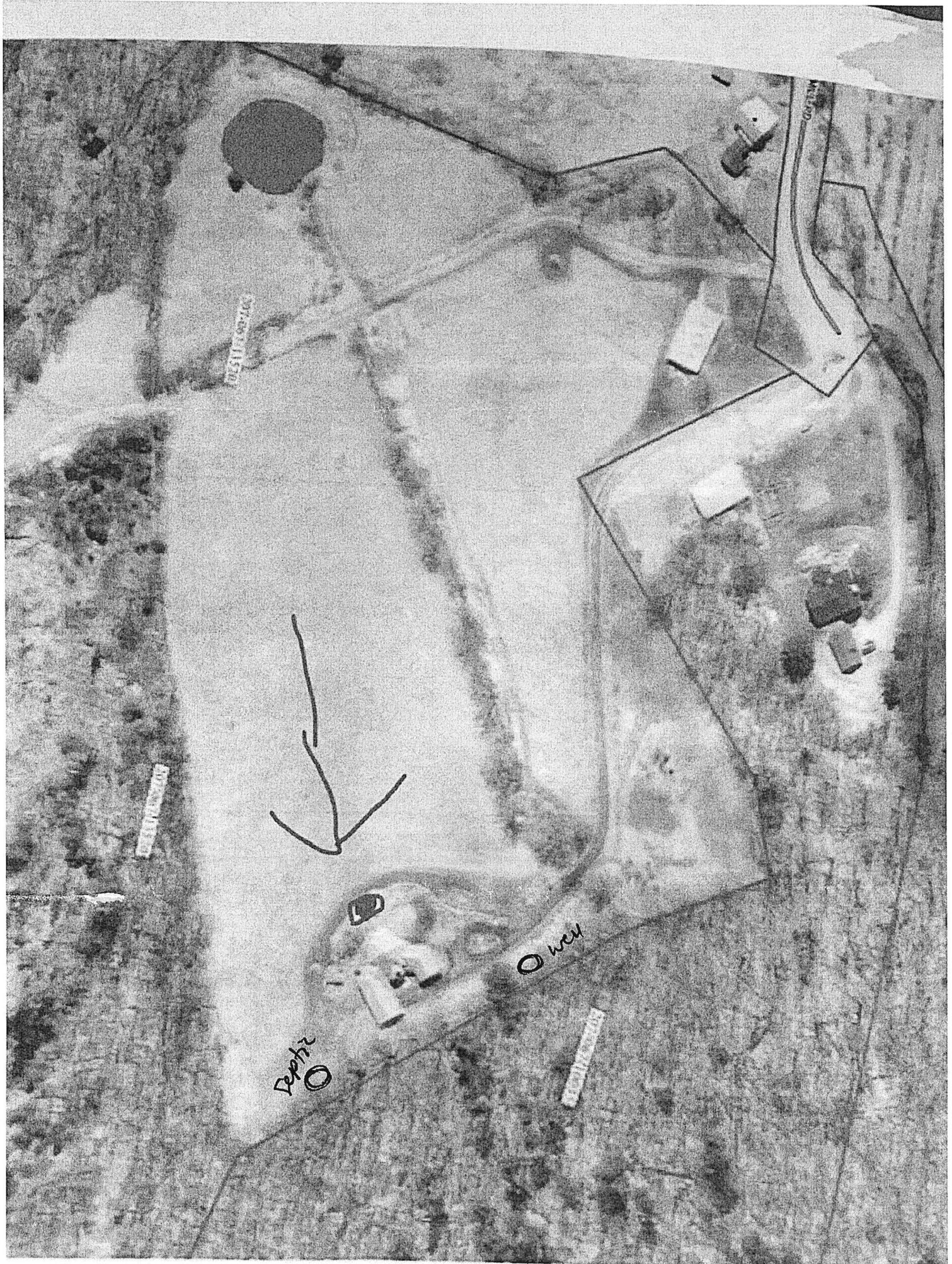
2/13/17

F Diagram - Provide diagram here and include all setbacks



Greater than 1000' to nearest property line in the West, South, and east directions. 200' to property line in the Northern direction (behind house).

Septic & well are located very distant to where the deck is proposed



Depth ○

○ way

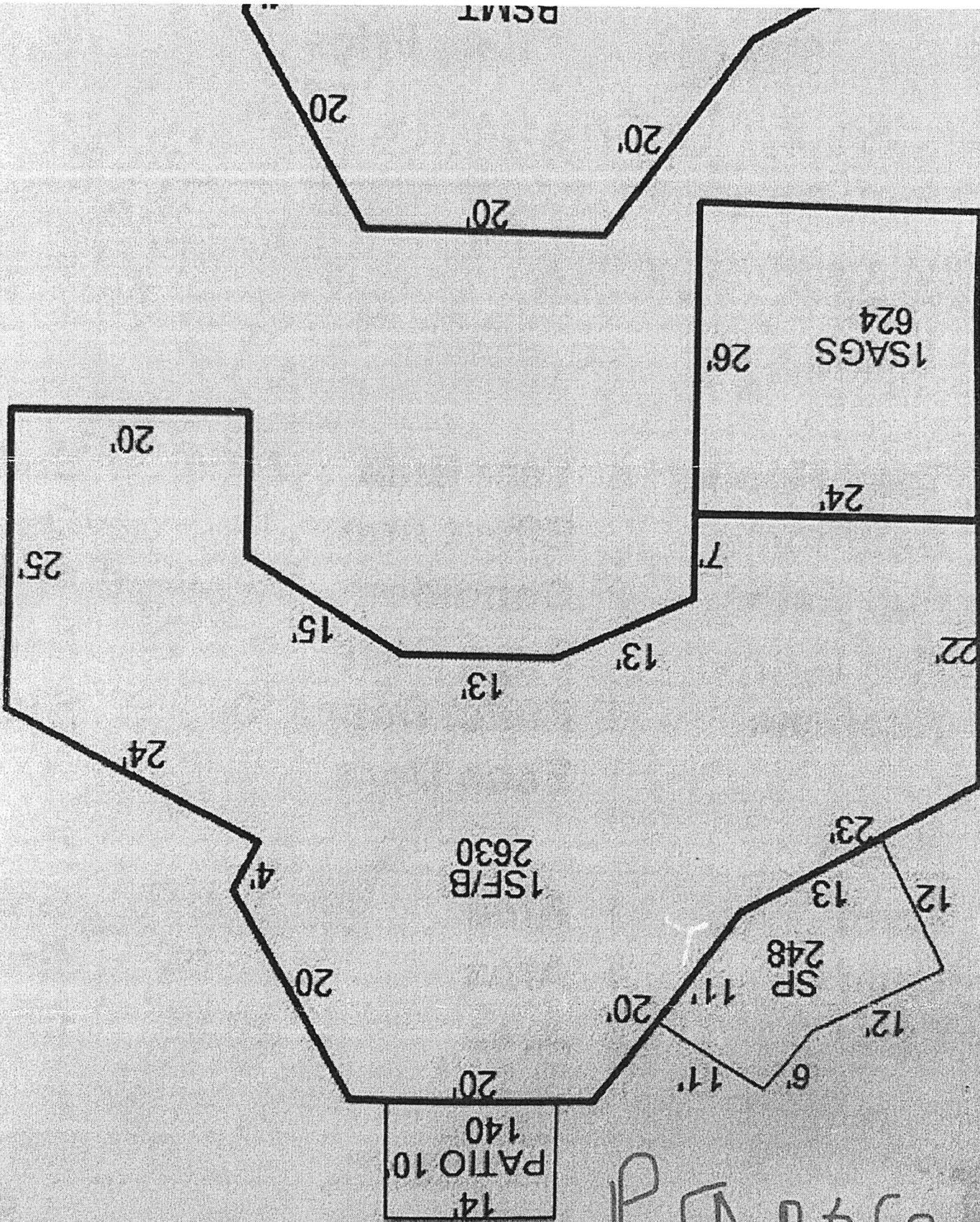
RECTANGULAR

RECTANGULAR

RECTANGULAR

RECTANGULAR

BSMT



Proposed Deck

