

Appeal Period Expires 3/11/2021  
 Zoning District R2

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

Application Date 2/25/20  
 Permit Number 2020-27

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: Melissa Mason

**A**

Parcel Account Numb. (Map-Parcel-Lot) 2-009-003-026  
 (found in Town Assessor's Office)  
 Property Address: 31 Fox Run Road  
 Owner: CAUTION MASON Melissa M. Clark  
 Owner Address: same as above  
 Owner Phone: (work) — (home) —  
 (cell) 802-343-6573 (Email) —  
 Contractors name: Matt Clarke Northern Basement Systems. Phone: 802-371-5000  
 Cell: 595-2297  
 Estimated Construction Dates: Start: 5/15/20 Completion: —/—/—  
 Sq. Feet: N/A Estimated Cost (labor & materials): \$ 8,377.52

**G**

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

**Residential:**

Single Family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two-family (duplex)(other)	<input checked="" 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 checked="" 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 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"/>
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**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: —/—/—  
 Proposed New Bedrooms: — Existing Bedrooms —

**C**

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

**D**

Driveway (Please attach copy of approved Curbcut / Utility Application).  
 Date of approval —/—/— 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**

see attached

Signature of Tenant and  
 Signature of Owner Melissa Mason  
Chris Mason

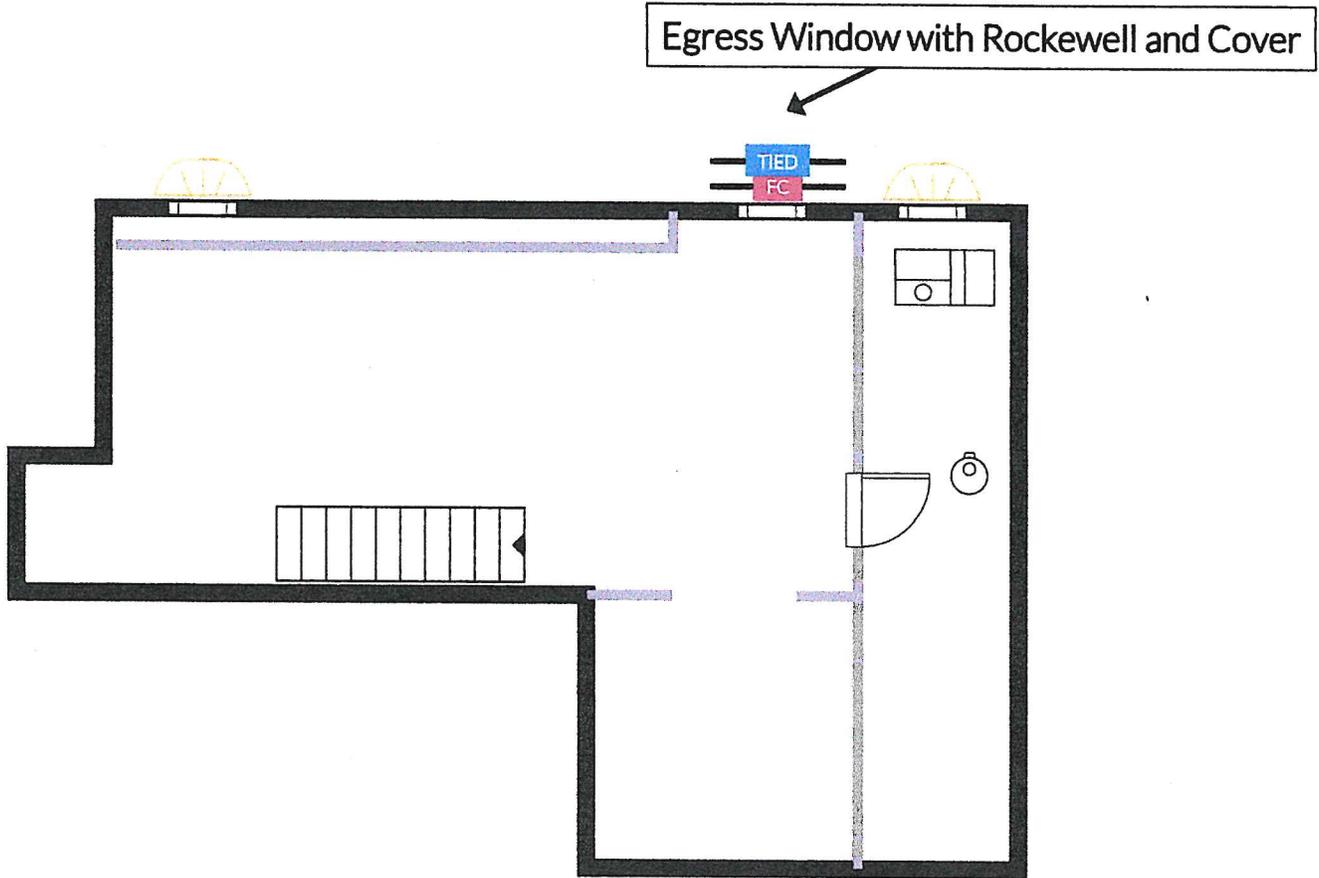
**Office Use Only**

Fees:	Type	Amount	Date Pd
Permit		\$ <u>50-</u>	<u>—/—/—</u>
Recreation		\$ <u>—</u>	<u>2/25/20</u>
Recording		\$ <u>15-</u>	<u>2/25/20</u>
Certificate of Occ		\$ <u>—</u>	<u>—/—/—</u>
Other		\$ <u>—</u>	<u>—/—/—</u>

Approved  Rejected  Date 2/25/2020  
 Issued to: A. Mason! M. Clark  
 Zoning Administrator: Shawn L. Kelley  
 Notes: Association to be notified prior to construction  
 C.O. Required Yes  No

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

# Job Details



Type of Wall ..... Poured Concrete  
Existing Wall Finish ..... Sheetrock  
Existing Floor Finish ..... Concrete