

Appeal Period Expires 2/15/2020
 Zoning District B1

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

Application Date 1/27/2020
 Permit Number 2020-014

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: Notified Applicant to call State

A Parcel Account Numb. (Map-Parcel-Lot) 2-047-003-003
 (found in Town Assessor's Office)
 Property Address: 6 David Dr Essex Jct VT
 Owner: Patco Properties LLC
 Owner Address: 6 David Drive Essex Jct VT
 Owner Phone: (work) 802-864-4000 (home) _____
 (cell) 802-316-0126 (Email) Shaun.Patco@comcast.net
 Contractors name: Patco Properties Phone: _____
Shaun Patnaude Cell: _____
 Estimated Construction Dates: Start: 1/27/20 Completion: 3/1/20
 Sq. Feet: 2,500 Estimated Cost (labor & materials): \$ 27,000

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"/>	N	<input type="checkbox"/>	A	<input type="checkbox"/>	R	<input type="checkbox"/>
Two-family (duplex)(other)	<input type="checkbox"/>						
Multi-family	<input type="checkbox"/>						
Condominium / Townhouse	<input type="checkbox"/>						
Mobile home	<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"/>
Stormwater: <u>Finish fit up of remaining space.</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stormwater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Erosion Control <u>office +</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: <u>Large training room.</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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 \$ 0 Date Paid: 1/1
 Proposed New Bedrooms: _____ Existing Bedrooms _____

C Water (Please attach Water Service Application).
 Public Private Fee \$ 0 Date Paid: 1/1

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

E Stormwater

Project disturbs an area greater than or equal to 1 acre – Erosion Control Permit Required. Attach completed permit application. NIA

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 no new employees.

Signature of Tenant and Signature of Owner [Signature]

Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ <u>100</u>	<u>1/27/20</u>
Recreation		\$ _____	<u>1/27/20</u>
Recording		\$ <u>30</u>	<u>1/27/20</u>
Certificate of Occ		\$ <u>75</u>	<u>1/27/20</u>
Other		\$ _____	<u>1/1</u>

Building Permit

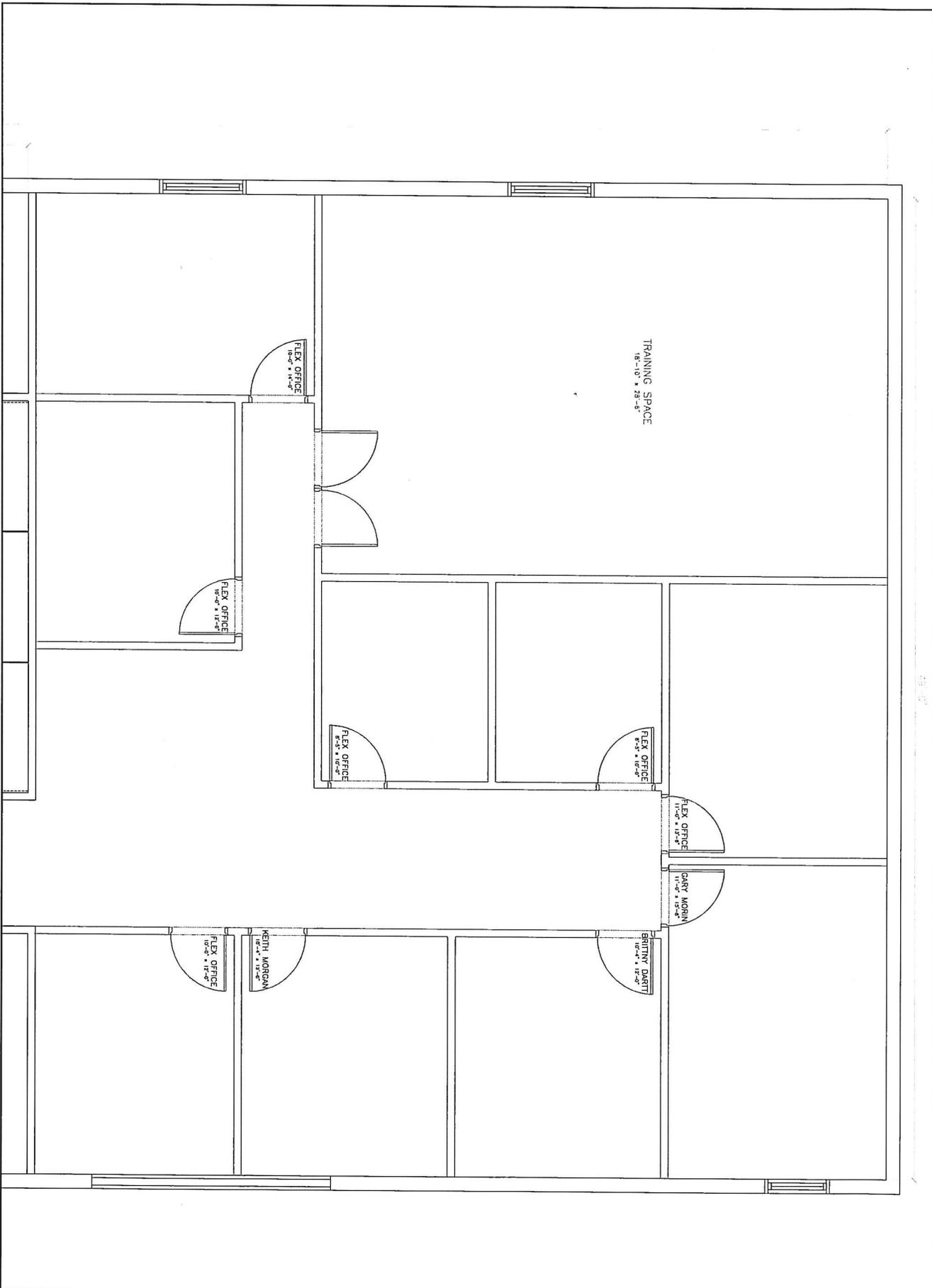
Approved Rejected Date 1/31/2020

Issued to: Patco Properties LLC

Zoning Administrator: Sharon L. Kelley

Notes: Energy form given

C.O. Required Yes No



 ALLIANCE GROUP P.O. BOX 446, ESSEX JCT., VT 05453 TEL: 802.844.4000 - FAX: 802.857.5019 WWW.AMVT.COM	ALLIANCE MECHANICAL 6 DAVID DRIVE, ESSEX JUNCTION, VERMONT 05452	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">NO.</th> <th style="width: 45%;">REVISION/ISSUE</th> <th style="width: 50%;">DATE</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	NO.	REVISION/ISSUE	DATE																<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> APPROVED TO: OPERATIONAL DATE: 01/20/2020 </td> <td style="width: 50%;"> DRAWING SCALE: 1/4" = 1'-0" </td> </tr> <tr> <td> DRAWN BY: BJD </td> <td> CHECKED BY: JF/GM/SP </td> </tr> <tr> <td colspan="2" style="text-align: center;"> PROJECT TITLE: ALLIANCE MECHANICAL ESSEX OFFICE </td> </tr> </table>	APPROVED TO: OPERATIONAL DATE: 01/20/2020	DRAWING SCALE: 1/4" = 1'-0"	DRAWN BY: BJD	CHECKED BY: JF/GM/SP	PROJECT TITLE: ALLIANCE MECHANICAL ESSEX OFFICE		SHEET NO. XXX
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