

Appeal Period Expires 3/21/24
 Zoning District C2/AR

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

Application Date 1/11/24
 Permit Number 2024-16

- Contact State Permit Specialist Jeff McMahon (477-2241) to check for state permitting and/or setbacks.
- Post permit card visible to the road immediately as Permit is appealable within 15 days of issuance.
- Call the Zoning Administrator at 878-1343 to schedule a Certificate of Occupancy inspection if indicated below as required.
- Call the Assessor at 878-1345 to schedule a re-assessment upon completion of work.
- Provide a diagram showing proposal and any easements, well or septic locations, etc.

SIGN HERE: Jeff Wood

A Parcel Account Num. (Map-Parcel-Lot) 2-012-001-001
 Property Address: 23 Osgood Hill Road
 Owner: Shawn + Elizabeth Evans
 Owner Address: SAME
 Owner Phone: (work) _____ (Cell) 802-393-3864
 (Email) _____
 Tenants name: N/A Phone: _____
 (or contractor) Cell: _____
 Estimated Construction Dates: Start: X Completion: 1/11/23
 Sq. Feet: 14'x16' porch Estimated Cost (labor & materials): \$ ATF
Basement - 994 s.f. finished 20,000

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 | <u>ATF</u> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" 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 type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Porch (enclosed) (open) <u>14x16'</u> | | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Deck | | <input type="checkbox"/> | <input checked="" 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 and/or State Septic Approval).
 Public Septic Connection Fee \$ _____ Date Paid: 1/1/
 Proposed New Bedrooms: _____ Existing Bedrooms _____

C Water (Please attach Water Service Application if applicable).
 Public Well Fee \$ _____ Date Paid: 1/1/

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.

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

G • Finish/Update existing Basement
 • Add Addition to Deck

Signature of Tenant and
 Signature of Owner Jeff Wood

Office Use Only

| | | | |
|--------------------|------|------------------|----------------|
| Fees: | Type | Amount | Date Paid |
| Permit | | \$ <u>150.00</u> | <u>1/12/24</u> |
| Recreation | | \$ _____ | _____ |
| Recording | | \$ <u>30.00</u> | <u>1/12/24</u> |
| Certificate of Occ | | \$ _____ | _____ |
| Other | | \$ _____ | _____ |

Approved Rejected Date 3/6/24
 Issued to: S. + E. EVANS
 Zoning Administrator: Shawn Kelley
 Notes: _____
 C.O. Required Yes No
 (Certificate of Occupancy)

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