

Appeal Period Expires 9/5/24
 Zoning District B1

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

Application Date 1/1
 Permit Number 2024-162

- 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: Thu H Chau

Parcel Account Numb. (Map-Parcel-Lot) 2- 047-012-816
 Property Address: 1 Market Place #15
 Owner: One Town Marketplace LLC
 Owner Address: 165 Day Lane Williston 05445
 Owner Phone: (work) (802) 288 8164 (Cell) 802-355-8292
 (Email) Tchau5148@gmail.com
 Tenants name: Diana Steltra Phone: 802-878-0990
 (or contractor) Cell: 802-343-8484
 Estimated Construction Dates: Start: N/A Completion: N/A
 Sq. Feet: 4000 +/- Estimated Cost (labor & materials): \$ N/A

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 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 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 checked="" 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 checked="" type="checkbox"/>

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

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

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

See attached narrative

Signature of Tenant and
 Signature of Owner Thu H Chau

Office Use Only			
Fees:	Type	Amount	Date Pd
Permit	<u>Use</u>	\$ <u>150.</u>	<u>8/21/24</u>
Recreation		\$	
Recording		\$ <u>15.</u>	
Certificate of Occ		\$	
Other		\$	
Building Permit			
Approved	<input checked="" type="checkbox"/>	Rejected <input type="checkbox"/>	Date <u>8/21/24</u>
Issued to:	<u>One Town Marketplace LLC</u>		
Zoning Administrator:	<u>Sharon Kelley</u>		
Notes:	<u>as no fit-up required</u>		
C.O. Required	<input checked="" type="checkbox"/>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
(Certificate of Occupancy)			

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

Sharon Kelley

From: Diana Sheltra <diana@sheltratax.com>
Sent: Tuesday, August 20, 2024 4:07 PM
To: Sharon Kelley
Subject: Re: 1 Marketplace Unit 15

N: This email originated from **OUTSIDE** our organization. **STOP & CONSIDER** before responding, clicking on links, or opening attachments.

Sharon, if you look back in your past emails, all these questions were answered already. My business is tax preparation tax resolution and bookkeeping. I have one employee who is my husband that is it.

The price of business did the same type of work mostly Bookkeeping. Bottom line Bookkeeping. I am moving in October 1 and they will be no renovations or fed up.

My business hours will be 8 AM to 5 PM Monday through Friday during tax season. My hours will be 8 AM to 5 PM seven days a week.

Please let me know if you have any other questions. I don't know the building information so therefore, I cannot fill out the first part of the form. I am waiting for my landlord to get back to me. Please give me a total of what I will owe, and I will send a check.

Diana J Sheltra, EA, CFE
Sheltra Tax & Accounting, LLC
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Essex Junction, VT 05452
802-878-0990
www.sheltratax.com