

Appeal Period Expires <u>9/25/24</u> Zoning District <u>AR</u>	<b>Town of Essex, Vermont</b> <b>Application for Zoning Permit</b> (Building Permit)	Application Date <u>   /   /   </u> Permit Number <u>2024-167</u>
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- 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:** \_\_\_\_\_

**A**

Parcel Account Numb. (Map-Parcel-Lot) 2-077-006-044

Property Address: 27 High View Dr

Owner: Ravi Bidichandani & Jessica Myers

Owner Address: 37 High View Dr

Owner Phone: (work) \_\_\_\_\_ (home) \_\_\_\_\_

(cell) 914-494-5588 (Email) ravi.bidichandani@gmail.com

Contractor Tenants name: Rivers Edge Bldg Dev Phone: 872-9390

Paul Bregna Cell: 802-343-0185

Estimated Construction Dates: Start: 9/15/24 Completion: 5/30/24

Sq. Feet: 2202 Estimated Cost (labor & materials): \$ 312,725

**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 checked="" 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 ( <u>attached</u> ) (detached)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Porch ( <u>enclosed</u> )	<input checked="" 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  Septic  Connection Fee \$ \_\_\_\_\_ Date Paid: \_\_\_/\_\_\_/\_\_\_

Proposed New Bedrooms: 3 Existing Bedrooms 0 NW-4-0308-2

**C**

**Water** (Please attach Water Service Application).

Public  Well  Fee \$ \_\_\_\_\_ Date Paid: \_\_\_/\_\_\_/\_\_\_

**D**

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

Date of approval \_\_\_/\_\_\_/\_\_\_

**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**

To be built pursuant to PC approval 2007-18 issued June 14, 2007.

*[Signature]*

Signature of Tenant and Signature of Owner \_\_\_\_\_

**Office Use Only**

Fees:	Type	Amount	Date Pd
	Permit	\$ <u>844.36</u>	<u>8/26/24</u>
	Recreation	\$ <u>428</u>	<u>8/26/24</u>
	Recording	\$ <u>30</u>	<u>8/26/24</u>
	Certificate of Occ	\$ <u>100</u>	<u>8/26/24</u>
	Other	\$ _____	<u>8/1/24</u>

Approved  Rejected  Date 9/10/24

Issued to: R. Bidichandani & J. Myers

Zoning Administrator: [Signature]

Notes: Rbes info

\_\_\_\_\_

\_\_\_\_\_

C.O. Required  Yes  No

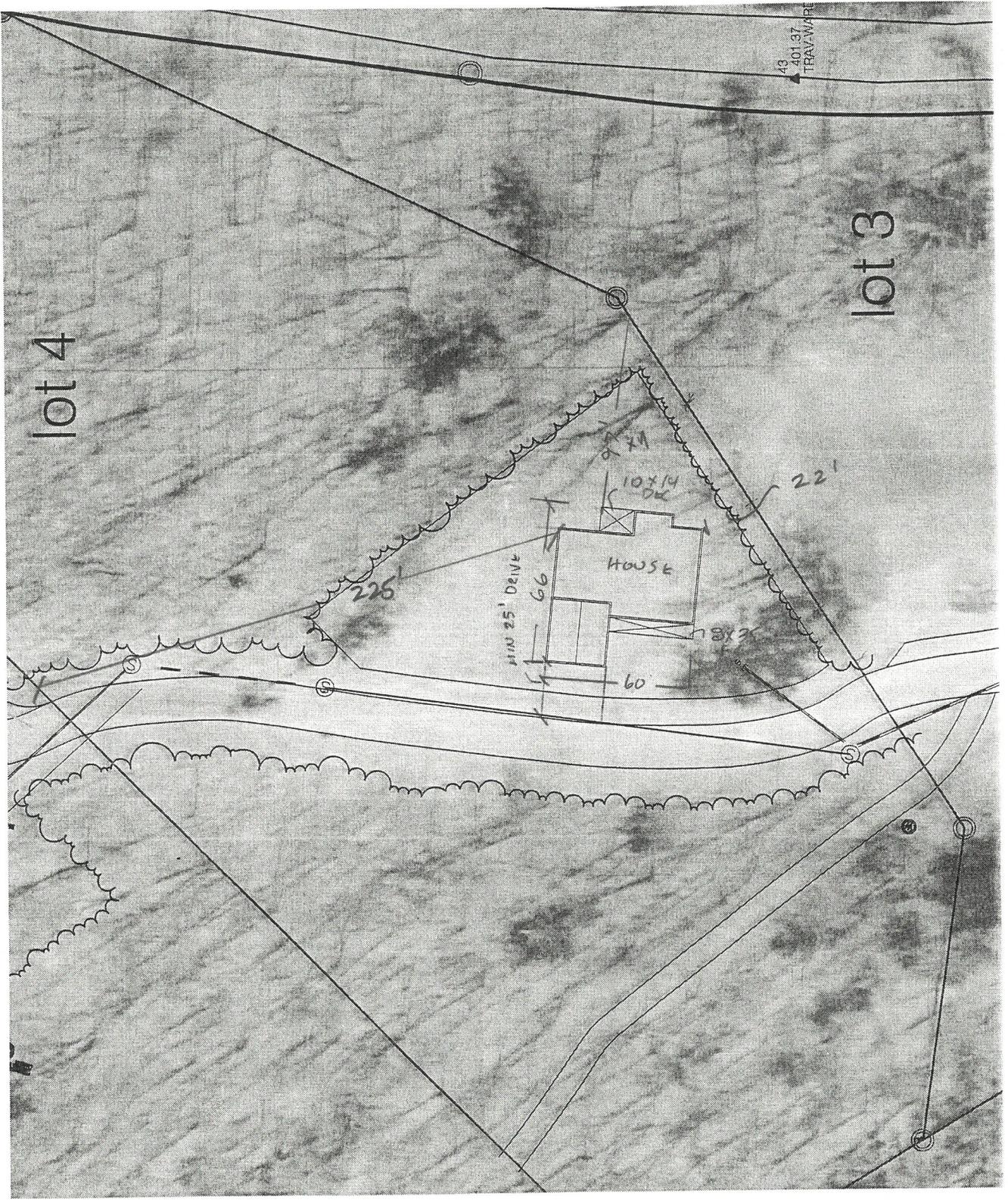
**THIS PERMIT VALID FOR TWELVE (12) MONTHS FROM DATE OF ISSUE**  
**RENEW FOR 1 YEAR (FREE) IF NOT EXPIRED**

02/13/17

43  
401.37  
TRAVELWAY

lot 4

lot 3



**TOWN OF ESSEX, VERMONT**  
**APPLICATION FOR CURB CUT / UTILITY PERMIT**

Pursuant to Title 19 V.S.A. Section 43. Application for curb cut and Utility Installation in Town Right-of-Way

All applications for curb cuts and utility installations shall be submitted to the Director of Public Works / Town Engineer for review. Applicants shall submit the information requested on this form and any additional information requested by the Director of Public Works / Town Engineer for a clear understanding of this application. The permit is issued under authority of the Town Manager in accordance with Section 601 of the Town Charter and 24 V.S.A. paragraph 1236 (2).

Application No. \_\_\_\_\_ / \_\_\_\_\_  
Date

Property Address: 27 High View Dr.

Owner Address: 27 High View Dr.

Owner Name: Ravi Bidichandani + Jessica Myers

Phone Number: (home) 914-494-5588 (work) \_\_\_\_\_ (cell) \_\_\_\_\_

Tax Map # 077 Tax Parcel 006 Tax Lot 004

Application is for: (check one)

A) New Curb Cut  B) Utility Installation: Overhead  Underground

Please use attached diagram to describe location and type of installation.

Comments by Director of Public Works / Town Engineer:

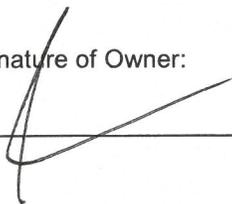
Culvert : Yes  No

Water Bar(s) : Yes  No

Culvert Diameter: (18 inch minimum) \_\_\_\_\_

Total length of Culvert: (30 foot minimum) \_\_\_\_\_

Signature of Owner:

  
\_\_\_\_\_

\*\*\* FOR OFFICE USE ONLY \*\*\*

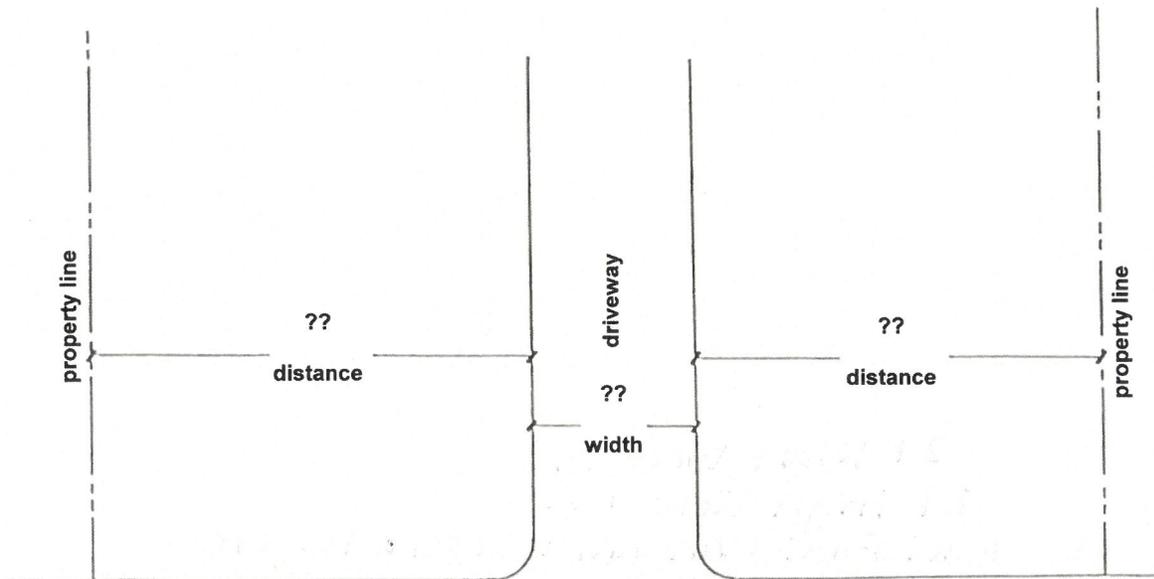
Fee Paid \$ \_\_\_\_\_

Approved  Rejected

Per Authority of the Town Manager by the  
Director of Public Works / Town Engineer

1. Culvert must be HIGH DENSITY POLYETHYLENE (HDPE) PIPE
2. Culvert will be purchased by the Applicant  
Culvert will be purchased and installed by the applicant. The Town of Essex Department of Public Works will inspect.
- 3.

Note: A MINIMUM OF 24 HOURS NOTICE IS REQUIRED PRIOR TO COMMENCEMENT OF CONSTRUCTION. WITHIN 24 HOURS OF COMPLETION, THE APPLICANT IS REQUIRED TO NOTIFY THE DIRECTOR OF PUBLIC WORKS / TOWN ENGINEER FOR INSPECTION PURPOSES.



27 Highview Dr.  
STREET NAME

Comments and / or special instructions from Director of Public Works / Town Engineer :

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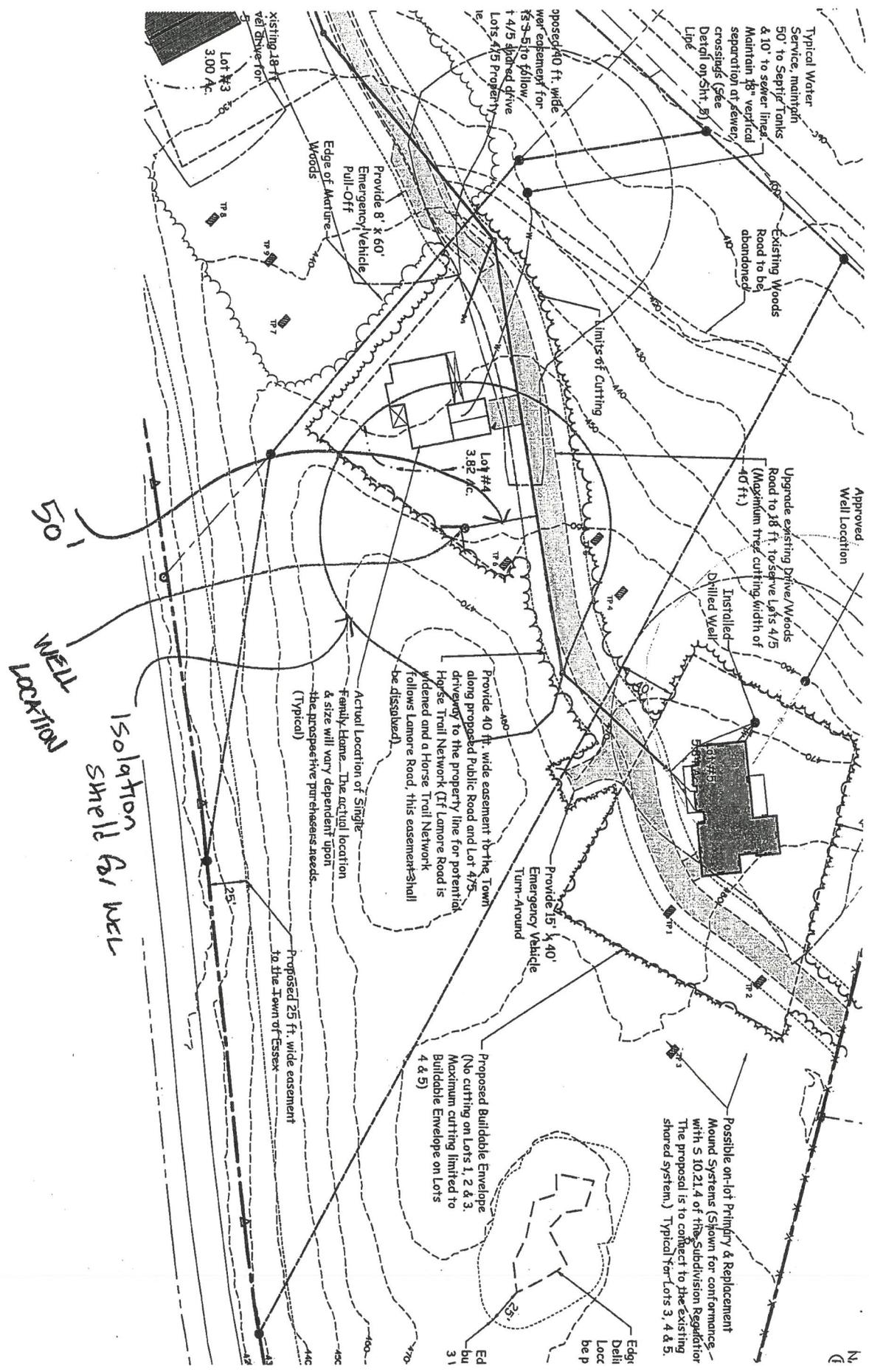
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**NOTE:** A MINIMUM OF 24 HOURS IS REQUIRED PRIOR TO COMMENCEMENT OF CONSTRUCTION. WITHIN 24 HOURS OF COMPLETION, THE APPLICANT IS REQUIRED TO NOTIFY THE DIRECTOR OF PUBLIC WORKS / TOWN ENGINEER FOR INSPECTION PURPOSES.



50'  
WELL LOCATION  
Isolation shell for well

Possible on-lot Primary & Replacement Mound Systems (Shown for conformance with S 10.21.4 of the Subdivision Regulator. The proposal is to connect to the existing shared system.) Typical for Lots 3, 4 & 5.

N