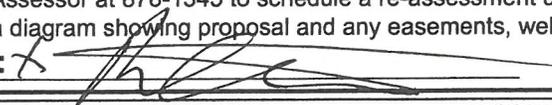


Appeal Period Expires 11/13/24  
 Zoning District HP-DC

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

Application Date 1/1/24  
 Permit Number 2024-206

- 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) 2-046-001-006  
 Property Address: 1005, Ethan Allen Ave.  
 Owner: CHAMPLAIN HOUSING TRUST  
 Owner Address: 88 KING ST. BURLINGTON, VT  
 Owner Phone: (work) \_\_\_\_\_ (Cell) 802-578-2729  
 (Email) rpeeters@comcast.net  
 Tenants name: 2ND GEN BUILDERS Phone: 578-2729  
 (or contractor) Cell: \_\_\_\_\_  
 Estimated Construction Dates: Start: 11/1/24 Completion: 5/1/25  
 Sq. Feet: 1,913 s.f. Estimated Cost (labor & materials): \$331,800  
2nd floor 1,760 s.f.

**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 <u>convert from 4 units to 2 units</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Condominium / Townhouse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobile home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Inclusions or Additions:</b>			
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"/>
<b>Non-residential:</b>			
Commercial / Industrial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Stormwater:</b>			
Stormwater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Erosion Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Other:</b>			
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: 1/1/24  
 Proposed New Bedrooms: 1 Existing Bedrooms 9

**C** Water (Please attach Water Service Application if applicable). N/A  
 Public  Well  Fee \$ \_\_\_\_\_ Date Paid: 1/1/24

**D** Driveway (Please attach copy of approved Curbcut / Utility Application).  
 Date of approval: 1/1/24 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.

SEE ATTACHED PLANS  
 Signature of Tenant and  
 Signature of Owner 

**Office Use Only**

Fees:	Type	Amount	Date Pd
Permit		\$ <u>895.80</u>	<u>10/28/24</u>
Recreation		\$ _____	<u>1/1/24</u>
Recording		\$ <u>30</u>	<u>10/28/24</u>
Certificate of Occ		\$ <u>100</u>	<u>10/28/24</u>
Other		\$ _____	<u>1/1/24</u>

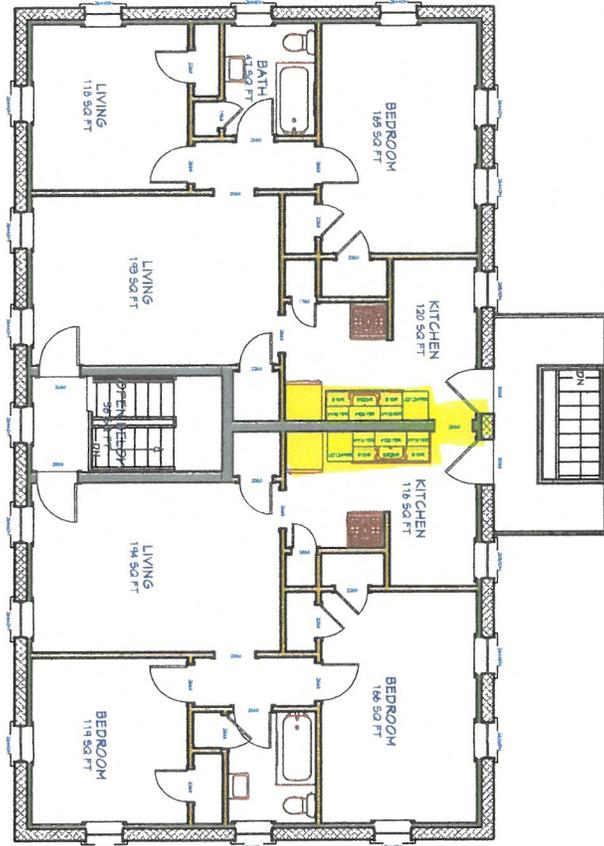
Approved  Rejected  Date 10/29/24  
 Issued to: CHT Ethan Allen LLC  
 Zoning Administrator: Sharon Kelley  
 Notes: Energy Info  
 C.O. Required Yes  No   
 (Certificate of Occupancy)

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



2nd Floor

LIVING AREA  
118.52 SQ FT



- New KITCHENS
- New Plumb. FixTURES
- Re-Finish Floor
- New Paint

A-2	SHEET:	SCALE:	DATE:	100x Ethan Allen Ave Essex Champlain Housing Trust	Recovery Housing	SHEET TITLE:	NO.	DESCRIPTION	BY	DATE
			12/17/2023							