

Appeal Period Expires <u>9/10/24</u> Zoning District <u>Mxd/C2</u>	Town of Essex, Vermont Application for Zoning Permit (Building Permit)	Application Date <u> / / </u> Permit Number <u>2024-166</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: Deborah

A	Parcel Account Numb. (Map-Parcel-Lot) <u>2-048-003-000</u> Property Address: <u>108 Colchester RD</u> Owner: <u>Franklin South LLC</u> Owner Address: <u>197 Pearl St Essex Jct</u> Owner Phone: (work) <u>8023433092</u> (Cell) _____ (Email) _____ Tenants name: <u>Self Gabriel Hardy</u> Phone: _____ (or contractor) _____ Cell: _____ Estimated Construction Dates: Start: <u>9/15/24</u> Completion: <u>3/20/25</u> Sq. Feet: <u>3000</u> Estimated Cost (labor & materials): \$ <u>20000</u>
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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 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 (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"/>
<i>Non-residential:</i>			
Commercial / Industrial	<input checked="" 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 and/or State Septic Approval). Public <input type="checkbox"/> Septic <input checked="" type="checkbox"/> Connection Fee \$ _____ Date Paid: <u> / / </u> Proposed New Bedrooms: _____ Existing Bedrooms: <u>WW-4-6100</u>
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C	Water (Please attach Water Service Application if applicable). Public <input type="checkbox"/> Well <input checked="" type="checkbox"/> Fee \$ <u>WW-4-6100</u> Date Paid: <u> / / </u>
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D	Driveway (Please attach copy of approved Curbcut / Utility Application). Date of approval: <u> / / </u> <u>existing</u>
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E	Stormwater <input type="checkbox"/> Project disturbs an area greater than or equal to 1 acre – Erosion Control Permit Required. Attach completed permit application. <input type="checkbox"/> Project creates new or expands existing impervious surface greater than or equal to ½ acre – Erosion Control Permit and Stormwater Management Permit required. Attach completed permit application.
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F	Diagram – Show a sketch of project on reverse of this application with property lines, building, and setbacks or attach separate sheet.
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	<p>To be built pursuant to PC approval 2024-7 issued August 8, 2024.</p> <p>Signature of Tenant and Signature of Owner: <u>[Signature]</u></p>
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Office Use Only			
Fees:	Type	Amount	Date Pd
	Permit	\$ <u>540</u>	<u>8/26/24</u>
	Recreation	\$ _____	
	Recording	\$ <u>30</u>	
	Certificate of Occ	\$ <u>100</u>	
	Other	\$ _____	
Building Permit			
Approved <input checked="" type="checkbox"/>	Rejected <input type="checkbox"/>	Date	<u>8/26/24</u>
Issued to: <u>Franklin South LLC</u>			
Zoning Administrator: <u>Sharon Kelley</u>			
Notes: _____			
C.O. Required Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (Certificate of Occupancy)			

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