

Appeal Period Expires 9/21/24  
Zoning District A2/C1

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

Application Date 9/5/24  
Permit Number 2024-174

- 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:** [Signature]

Parcel Account Numb. (Map-Parcel-Lot) 2-017-018-000

Property Address: 200 Brigham Hill Rd.

Owner: David L + Robin C Garner

Owner Address: \_\_\_\_\_

Owner Phone: (work) \_\_\_\_\_ (Cell) \_\_\_\_\_  
(Email) \_\_\_\_\_

Tenants name: Lo-Ko's Excavator Phone: 802-849-2930  
(or contractor) \* Cell: 802-599-9860

Estimated Construction Dates: Start: 9/30/24 Completion: 9/30/25

Sq. Feet: 1200 Estimated Cost (labor & materials): \$30K

**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 checked="" 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 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"/>

*Handwritten notes: demolish, 2 car*

**B Sewage Disposal** (Please attach Sewer and/or State Septic Approval).

Public  Septic  Connection Fee \$ \_\_\_\_\_ Date Paid: 1/1

Proposed New Bedrooms: 0 Existing Bedrooms 3

**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**

Demolish 2 Car Garage  
Addition on Garage footprint  
second floor unfinished storage  
See attached.

Signature of Tenant and Signature of Owner [Signature]

**Office Use Only**

Fees:	Type	Amount	Date Pd
Permit		\$ <u>81</u>	<u>9/5/24</u>
Recreation		\$ _____	<u>1/1</u>
Recording		\$ <u>15</u>	<u>9/5/24</u>
Certificate of Occ		\$ _____	<u>1/1</u>
Other		\$ _____	<u>1/1</u>

Building Permit Approved  Rejected  Date 9/6/24

Issued to: David L + Robin C Garner

Zoning Administrator: Johan Kelley

Notes: ABS INFORMATION given

C.O. Required (Certificate of Occupancy) Yes  No

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

\* Second floor unfinished studs for storage \*



new addition to replace garage

existing house