

Appeal Period Expires <u>5/30/23</u> Zoning District <u>MXD-POZ(B1)</u>	Town of Essex, Vermont Application for Zoning Permit (Building Permit)	Application Date <u>5/15/23</u> Permit Number <u>2023-64</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:

DocuSigned by:

 Brian Sheedy

A Parcel Account Numb. (Map-Parcel-Lot) 2- 092-001-002

Property Address: 71 UPPER MAIN ST ESSEX, VT 05452

Owner: McDonald's USA, LLC closhawn gregoire

Owner Address: 110 N Carpenter St. Chicago IL 60607

Owner Phone: (work) 630-209-1540 (home) _____
 (cell) _____ (Email) brian.sheedy@us.mcd.com

Contractor
 Tenant's name: Dan Mayo Phone: (802) 879-5300
Local Mgr. Jason Shank Cell: 6033120168

Estimated Construction Dates: Start: 6/1/23 Completion: 9/1/23

Sq. Feet: +/- 1,500 Estimated Cost (labor & materials): \$65,000

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 type="checkbox"/> <input type="checkbox"/> <input checked="" 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). n/a

Public Septic Connection Fee \$ _____ Date Paid: ___/___/___

Proposed New Bedrooms: _____ Existing Bedrooms _____

C Water (Please attach Water Service Application). n/a

Public Well Fee \$ _____ Date Paid: ___/___/___

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.

G see attached

DocuSigned by:

 Signature of Tenant and Signature of Owner
 Brian Sheedy
5B4D96BC62DA452...

Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ <u>390</u>	<u>5/15/23</u>
Recreation		\$ <u>30</u>	<u>5/15/23</u>
Recording		\$ _____	<u>___/___/___</u>
Certificate of Occ		\$ <u>100</u>	<u>5/15/23</u>
Other		\$ _____	<u>___/___/___</u>

Building Permit
 Approved Rejected Date 5/15/23

Issued to: McDonald's USA, LLC

Zoning Administrator: Sharon Kelley

Notes: _____

C.O. Required Yes No

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

Sharon Kelley

From: Shawn Gregoire <sgregoire@bohlereng.com>
Sent: Thursday, May 4, 2023 2:40 PM
To: Sharon Kelley
Cc: Steve Wilson
Subject: 71 UPPER MAIN ST ESSEX, VT 05452
Attachments: 044-0047 N.S.N. 17552 Essex_ VT SAO Set 4-18-2023 .pdf

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

Good Afternoon Sharron,

Please see attached architectural plans showing the interior remodel of the McDonald's located at 71 Upper Main Street. The proposed work will involve the reconfiguration of the customer service counter remodel of the customer seating area and restrooms. Please send me the fee schedule and accepted types of payment.

Thank You

Shawn Gregoire
Sr. Design Engineer
17 Computer Drive West | Albany, NY 12205
70 Linden Oaks, Third Floor, Suite 15 | Rochester, NY 14625
o 518-438-9900 / sgregoire@bohlereng.com
www.BohlerEngineering.com

BOHLER //

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Your transaction has been successfully completed!

Account Information

Payment Type: Zoning Fees

Address: Bohler Engineering 17 Computer Dr West Albany NY 12205 US

Phone Number: 5184389900

Email Address: sgregoire@bohlereng.com

Property Address: 71 Upper Main Street, Essex, VT 05452

Payment Information

Amount: \$520.00

Convenience Fee: \$13.78*

Total Amount: \$533.78

Card Number: XXXXXXXXXXXXX1413

Expiration Date: 05/2023

Steven Wilson

Bohler Engineering 17 Computer Dr West Albany NY 12205 US

Your confirmation number is:

4546595

05/05/2023 15:23:10 [EST]

TOWN OF ESSEX

CERTIFICATE OF OCCUPANCY APPLICATION

DATE OF REQUEST: _____ FEE: \$115.00 _____ (includes recording)
MAP/PARCEL/LOT: 207-067-14245 NO. _____

The undersigned herewith requests an inspection of the premises and the issuance of "Certificate of Occupancy" of premises, or portion thereof, for use or habitation.



This request is for use only of existing land or buildings.



This request is for new construction or rehabilitated or altered structure which was done under authority of zoning permit # _____

issued to McDonald's USA, LLC on _____.

Premises are at 71 UPPER MAIN ST ESSEX, VT 05452

Water service installation inspected and approved by _____

Driveway location inspected and approved by _____

Sanitary sewer connection or septic system inspected and approved by:

Name: _____ Date: _____

Construction was begun _____, 20____ and completed _____, 20____

Approval granted by _____ P.C. or Z.B.A. _____ on _____, 20____.

Use of premises intended restaurant
(type of use)

Applicant's Signature: _____ Telephone: 630-209-1540 Cell: _____
Email Address: brian.sheedy@us.mcd.com

By issuance of this Occupancy Permit, the Town of Essex Zoning Administrator hereby acknowledges that the use and/or building construction is in complete conformity with the Zoning Regulations, unless otherwise noted. Field measurements and similar dimensions for setbacks are based in part on evidence supplied by owner. The Town of Essex is not liable for errors or mistakes when it is found that information submitted by the applicant is erroneous or inaccurate.

Certificate of Occupancy has been approved with _____ without _____ conditions.
If with conditions, see attachment outlining same.

Certificate of Occupancy denied _____. Please see attachment with reasons for denial.

Date

Zoning Administrator