

Appeal Period Expires 3,30,23
 Zoning District R2

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

Application Date 1/1
 Permit Number 2023-22

- 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]*

A Parcel Account Numb. (Map-Parcel-Lot) 2-079-001-123
 Property Address: 11 TIMBERLANE DRIVE
 Owner: MADELINE ROHL + RYAN BARTA
 Owner Address: 11 TIMBERLANE DR.
 Owner Phone: (work) N/A (home) 614-827-5386
 *(cell) 630-272-5925 (Email) madi.rohl@cmz.com
 Tenants name: N/A Phone: N/A Cell: N/A
 Estimated Construction Dates: Start: 5/15/23 Completion: 6/15/23
 Sq. Feet: 20 Estimated Cost (labor & materials): \$ 600

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	<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"/>
Inclusions or Additions:			
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"/>
Non-residential:			
Commercial / Industrial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stormwater:			
Stormwater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Erosion Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:			
Change in use <i>chicken coop</i>	<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: 1/1
 Proposed New Bedrooms 0 Existing Bedrooms _____

C Water (Please attach Water Service Application).
 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 *APPLICANT SHALL Adhere to Zoning Regulations, section 4.2 E (chickens)*
 Signature of Tenant and Signature of Owner *[Signatures]*

Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ <u>150.-</u>	<u>1/1</u>
Recreation		\$ _____	<u>3/13/23</u>
Recording		\$ <u>15.-</u>	<u>1/1</u>
Certificate of Occ		\$ _____	<u>1/1</u>
Other		\$ _____	<u>1/1</u>

Building Permit
 Approved Rejected Date 3/13/23

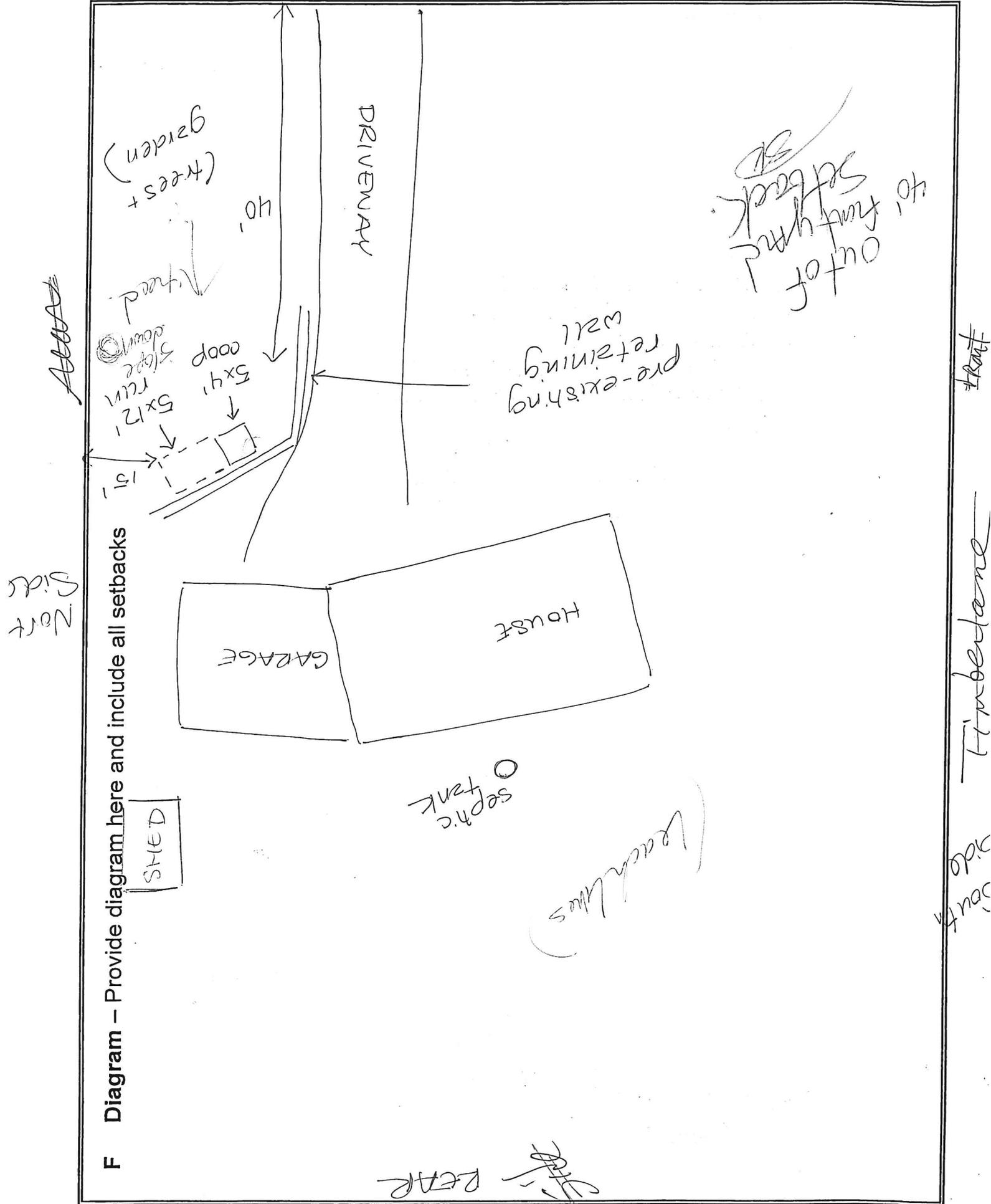
Issued to: M. Rohl + R. Barta
 Zoning Administrator: Sharon Kelly

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**

Side

FRONT



F Diagram - Provide diagram here and include all setbacks

SHED

North Side

side yard

Timberlane

front

40' front yard setback

pre-existing retaining wall

septic tank

Leach Lines

P. R. R. 11/11/11

(trees + garden)

slope down

run

5x12

5x4

coop

40'

40'

40'

40'

40'

40'

40'

40'

40'

40'