Appeal Period Expires __/__/__
Zoning District MXD-PUD

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

Application Date 6/30/2
Permit Number 2023-111

- 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] ATF

**A**

**Parcel** Account Numb. (Map-Parcel-Lot) 2- 101-003-013

Property Address: 25 Sydney Drive

Owner: Peter and Karen Tavlin

Owner Address: 25 Sydney Drive

Owner Phone: (work) — (Cell) 802-735-8428

(Email) pktavlin@comcast.net

Tenants name: — Phone: —
(or contractor) Cell: —

Estimated Construction Dates: Start: 3/1/01 Completion: 4/1/01

Sq. Feet: 633 Estimated Cost (labor & materials): $ 12,000

**B**

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

Public ☒ Septic ☐ Connection Fee $_____ Date Paid: __/__/__

Proposed New Bedrooms: ____ Existing Bedrooms ____

**C**

**Water** (Please attach Water Service Application if applicable).

Public ☒ Well ☐ Fee $_____ Date Paid: __/__/__

**D**

**Driveway** (Please attach copy of approved Curbcut / Utility Application).

Date of approval: __/__/__ 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 ½ 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**

Signature of Tenant and Signature of Owner [signature]

**G**

Check box(es) which describe proposed use or construction (circle choice in parenthesis).

N = New A = Addition R = Remodel

Half Basement

| | N | A | R |
|---|---|---|---|
| *Residential:* | | | |
| Single Family | ☐ | ☐ | ☒ |
| Two-family (duplex)(other) | ☐ | ☐ | ☐ |
| Multi-family | ☐ | ☐ | ☐ |
| Condominium / Townhouse | ☐ | ☐ | ☐ |
| Mobile home | ☐ | ☐ | ☐ |
| *Inclusions or Additions:* | | | |
| Garage (attached) (detached) | ☐ | ☐ | ☐ |
| Porch (enclosed) (open) | ☐ | ☐ | ☐ |
| Deck | ☐ | ☐ | ☐ |
| Pool (in) (above) ground | ☐ | ☐ | ☐ |
| Shed | ☐ | ☐ | ☐ |
| Barn (residential) (agriculture) | ☐ | ☐ | ☐ |
| *Non-residential:* | | | |
| Commercial / Industrial | ☐ | ☐ | ☐ |
| *Stormwater:* | | | |
| Stormwater | ☐ | ☐ | ☐ |
| Erosion Control | ☐ | ☐ | ☐ |
| *Other:* | | | |
| Change in use | ☐ | ☐ | ☐ |
| Miscellaneous | ☐ | ☐ | ☐ |
| Renewal | ☐ | ☐ | ☐ |

ATF ***Office Use Only***

| Fees: Type | Amount | Date Pd |
|---|---|---|
| Permit | $ 150.00 | 6/30/23 |
| Recreation | $ | __/__/__ |
| Recording | $ 15.00 | 6/30/23 |
| Certificate of Occ | $ | __/__/__ |
| Other | $ | __/__/__ |

**Building Permit**
Approved ☒ Rejected ☐ Date 7/5/23

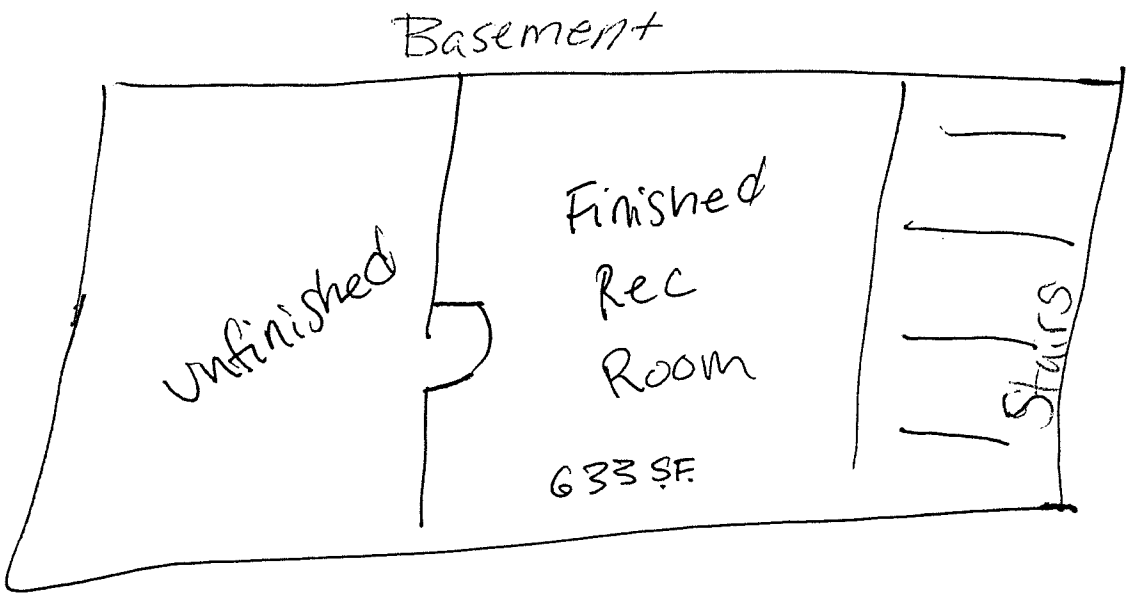
Issued to: Peter + Karen Tavlin

Zoning Administrator: [signature]

Notes: _____

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

02/13/17

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

**F** **Diagram** – Provide diagram here and include all setbacks