

Appeal Period Expires 3/4/23  
Zoning District RZ

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

Application Date 2/10/23  
Permit Number 2023-16

- 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:**

Parcel Account Numb. (Map-Parcel-Lot) 2-050-110-000  
Property Address: 16 Perry Dr.  
Owner: Paul Popovich & Redd Soracco  
Owner Address: 16 Perry Dr.  
A Owner Phone: (work) \_\_\_\_\_ (home) \_\_\_\_\_  
(cell) 470 252 9987 (Email) Paul.Popovich@jrcvt.com  
~~Contractor's~~ Tenants name: Ward Construction Phone: 802-999-9480 Cell: \_\_\_\_\_  
Estimated Construction Dates: Start: 4/15/23 Completion: 6/15/23  
Sq. Feet: 36 Estimated Cost (labor & materials): \$ 17,500

**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 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"/>
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	<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 2

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  
see attached  
Signature of Tenant and Signature of Owner [Signature]

**Office Use Only**

Fees:	Type	Amount	Date Pd
Permit		\$ <u>17.5</u>	<u>2/10/23</u>
Recreation		\$ _____	<u>1/1</u>
Recording		\$ <u>15</u>	<u>2/10/23</u>
Certificate of Occ		\$ _____	<u>1/1</u>
Other		\$ _____	<u>1/1</u>

Approved  Rejected  Date 2/17/23  
Issued to: P. Popovich & R. Soracco  
Zoning Administrator: Sharon Kelley  
Notes: lbs info given  
C.O. Required Yes  No

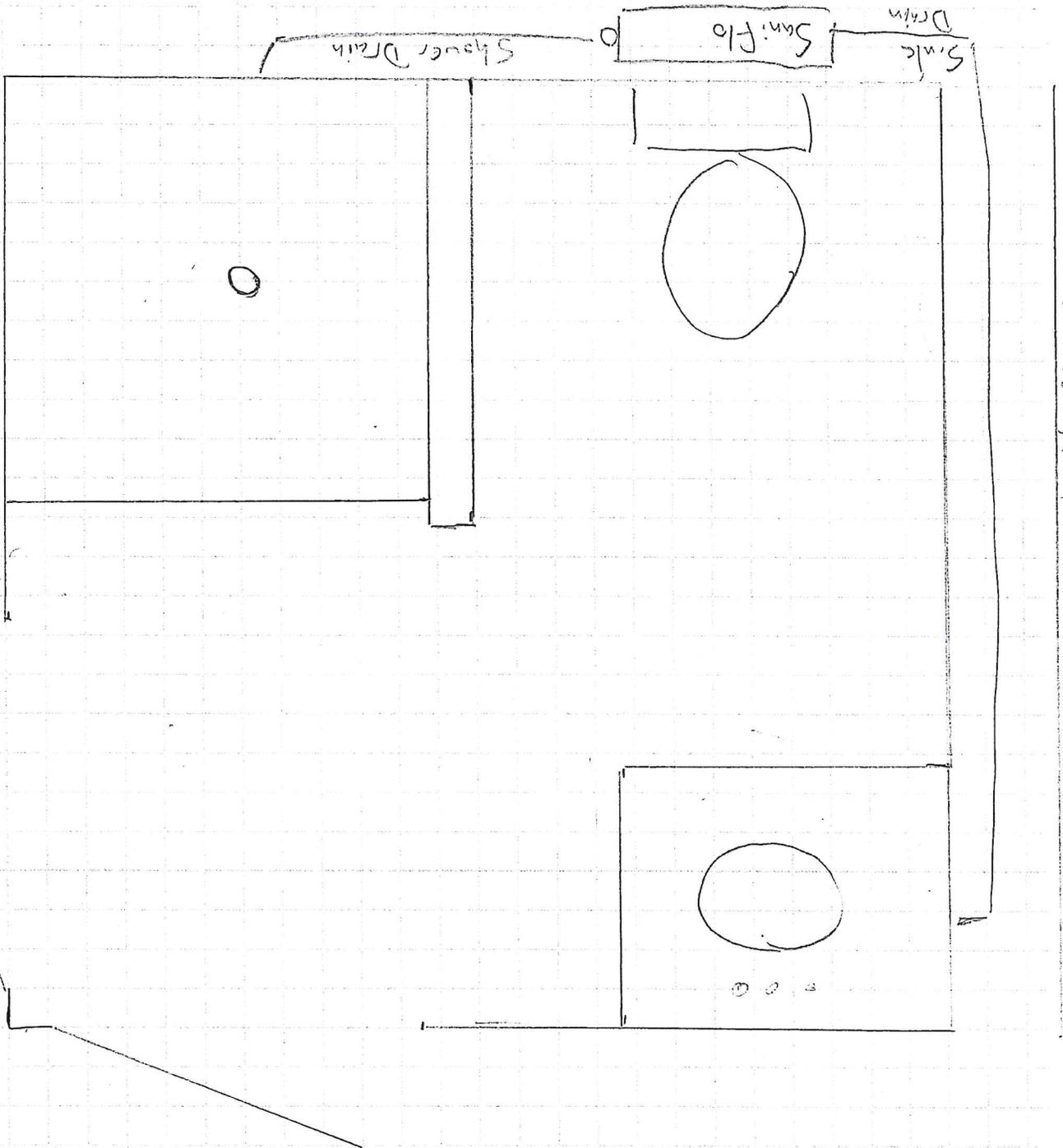
**THIS PERMIT VALID FOR TWELVE (12) MONTHS FROM DATE OF ISSUE  
RENEW FOR 1 YEAR (FREE) IF NOT EXPIRED**



INNOVATIVE  
PRINTING  
MAILING  
MARKETING  
SOLUTIONS

1" Scale

Unfinished Section of Basement



Foundation

**OFFSET**

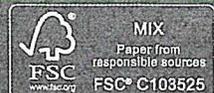
45 Waterloo Street  
Warner, NH 03278  
P: 603.456.3101  
F: 603.456.3105

**DIGITAL**

11 Commerce Avenue  
West Lebanon, NH 03784  
P: 603.298.5057  
F: 603.276.7018

**BINDERY**

29 Newmarket Road  
Warner, NH 03278  
P: 603.456.3101  
F: 603.456.3105



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