

Appeal Period Expires 11/29/23  
 Zoning District R2

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

Application Date 1/1  
 Permit Number 2023-173

- 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) 2-058-035-000  
 Property Address: 15 Jericho Rd  
 Owner: Alder Brook Cottage LLC  
 Owner Address: 13 Jericho Rd  
 Owner Phone: (work) \_\_\_\_\_ (Cell) \_\_\_\_\_  
 (Email) FRAN.Kinghorn@gmail  
 Tenants name: Sam. Kinghorn Phone: \_\_\_\_\_  
 (or contractor) \_\_\_\_\_ Cell 802 238 6561  
 Estimated Construction Dates: Start: 11/14/23 Completion: 1/1/24  
 Sq. Feet: 1100 Estimated Cost (labor & materials): \$5K

**B** Sewage Disposal (Please attach Sewer and/or State Septic Approval).  
 Public  Septic  Connection Fee \$ \_\_\_\_\_ Date Paid: 1/1  
 Proposed New Bedrooms: \_\_\_\_\_ Existing Bedrooms 2 (was)

**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** House demolished by fire on 11-4-2023.  
 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  
**Residential:**  
 Single Family FIRE damage remove  N  A  R  
 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

**Office Use Only**

Fees:	Type	Amount	Date Pd
Permit		\$ <u>75.00</u>	<u>11/14/23</u> SK
Recreation		\$ _____	_____
Recording		\$ <u>15.00</u>	_____
Certificate of Occ		\$ _____	_____
Other		\$ _____	_____

Building Permit  
 Approved  Rejected  Date 11/14/23  
 Issued to: Alderbrook Cottage LLC  
 Zoning Administrator: Sharon Kelley  
 Notes: Instructed to contact EPA.  
 C.O. Required Yes  No  (Certificate of Occupancy)

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