

Appeal Period Expires 8/19/23
Zoning District R2

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

Application Date 8/3/23
Permit Number 2023-130

- 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: James Brady

Parcel Account Numb. (Map-Parcel-Lot) 2- 031-066-000

Property Address: 4 Forest Rd

Owner: James E Brady

Owner Address: 4 Forest Rd

A Owner Phone: (work) _____ (Cell) (802) 373-4987
(Email) jeb.brady@comcast.net

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

Estimated Construction Dates: Star 7/27/23 Completion: 2/1/24

Sq. Feet: 4000s.F. Estimated Cost (labor & materials): \$ 30,000

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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 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"/>

Accessory Apt
1 bedroom
160sq ft

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

Public Septic Connection Fee \$ _____ Date Paid: 1/1

Proposed New Bedrooms: 0 Existing Bedrooms 3 *relocate 1 bedroom to acc. unit*

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 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.

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over + see attached

Signature of Tenant and Signature of Owner: James Brady

Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ <u>81</u>	<u>8/3/23</u>
Recreation		\$ _____	<u>1/1</u>
Recording		\$ <u>30</u>	<u>8/3/23</u>
Certificate of Occ		\$ <u>100</u>	<u>8/3/23</u>
Other		\$ _____	<u>1/1</u>

Building Permit

Approved Rejected Date 8/4/24

Issued to: James E Brady

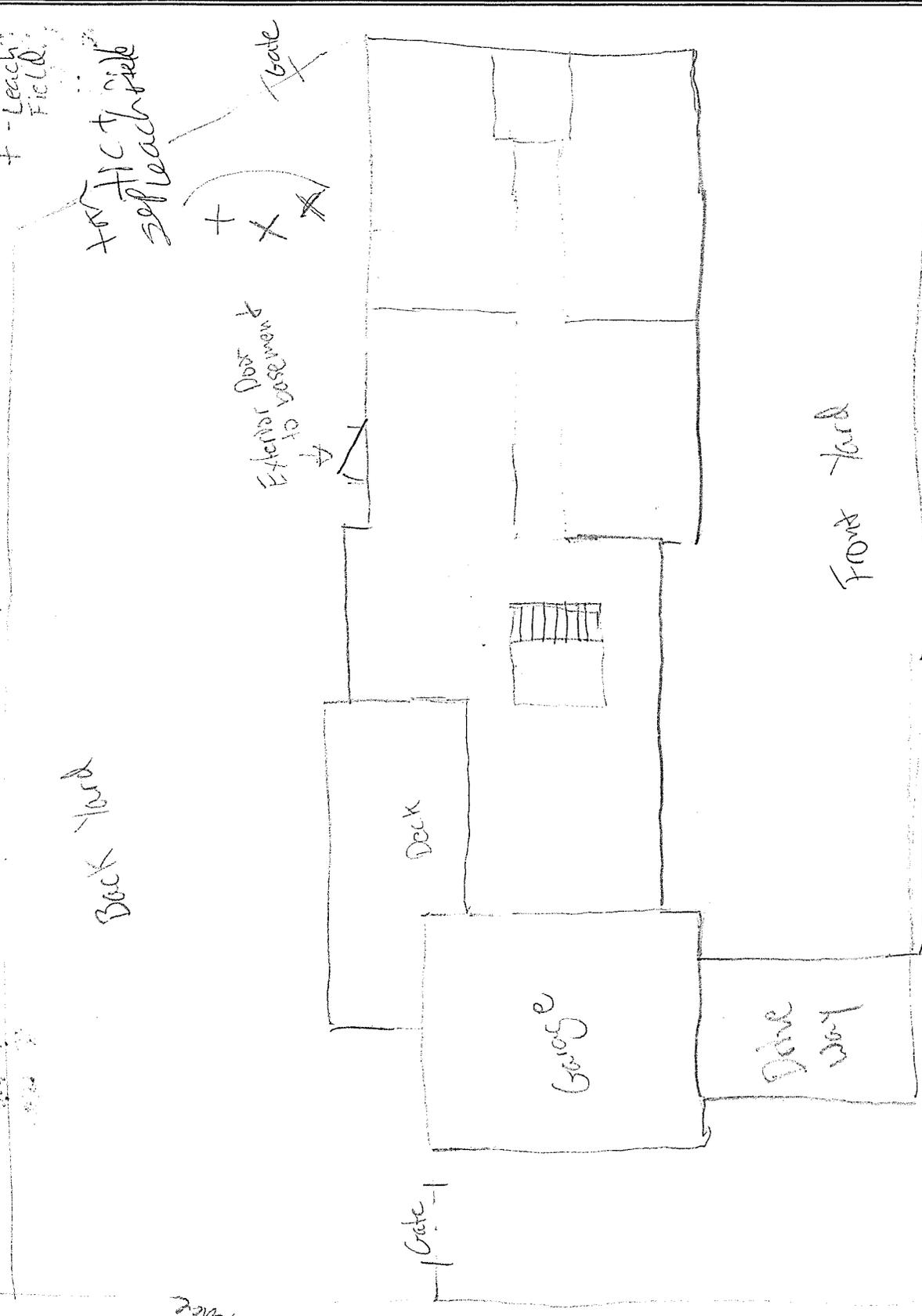
Zoning Administrator: Sharon Kelley

Notes: _____

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

**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



Property Line

SKETCH/AREA TABLE ADDENDUM

Parcel No 2031066000

Property Address 4 Forest Rd

City Essex (Town)

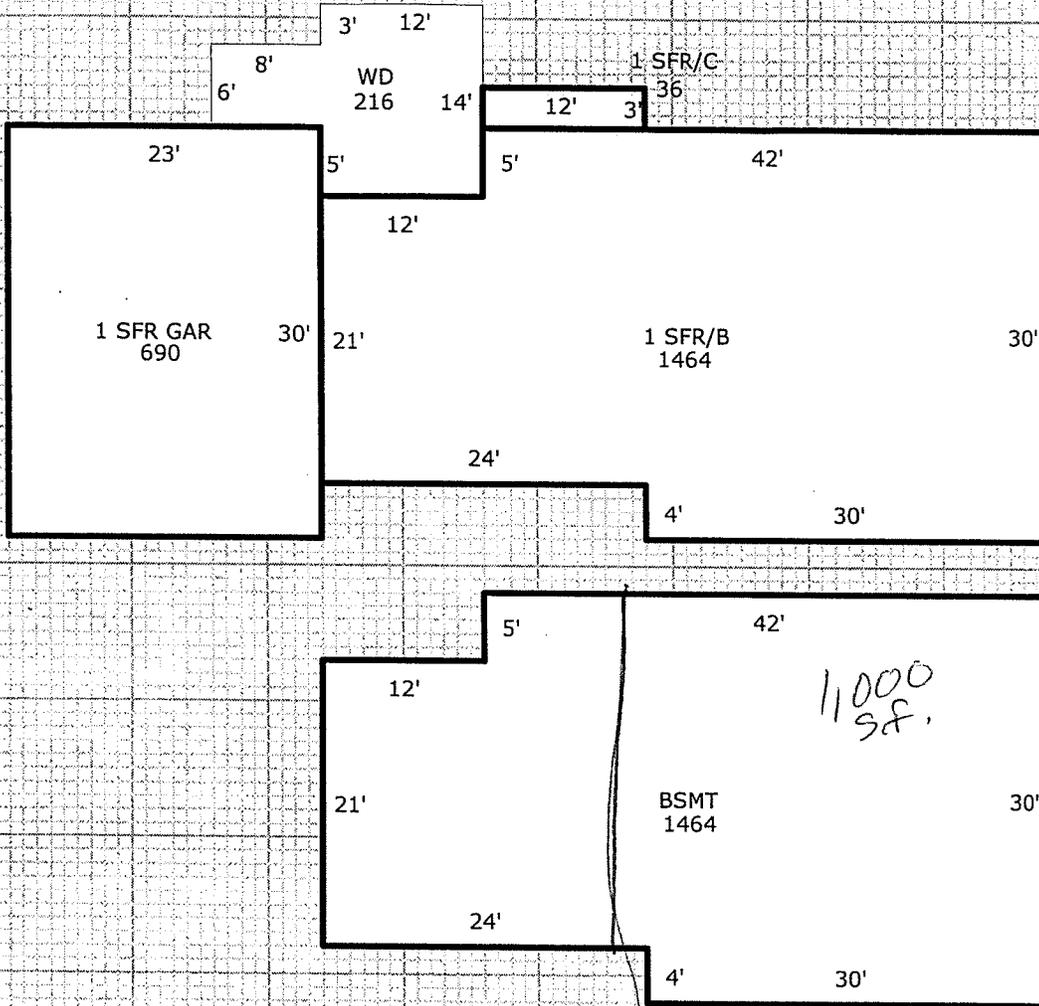
State VT

Zip 05452

Owner

Client

Appraiser Name



1464
1000

2464

11000
SF.

Scale: 1" = 14'

AREA CALCULATIONS SUMMARY

Code	Description	Factor	Net Size	Perimeter	Net Totals
1FL1	1 SFR/B	1.00	1464	168	
	1 SFR/C	1.00	36	30	1500
1BS	BSMT	1.00	1464	168	1464
GAR11	1 SFR GAR	1.00	690	106	690
P/P11	WD	1.00	216	68	216
Net BUILDING Area (rounded w/ factors)					1500

AREA CALCULATIONS