

Appeal Period Expires 3/14/23
 Zoning District AR

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

Application Date 2/27/23
 Permit Number 2023-20

- 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: D. DeCher

Parcel Account Numb. (Map-Parcel-Lot) 2-015-008-013

Property Address: 301 Browns River Rd

Owner: David + Sharon Clow

Owner Address: 301 Browns River Rd

Owner Phone: (work) _____ (home) _____
 (cell) 802-573-2253 (Email) DClow2253

Tenants name: _____ Phone: @ A01
 Cell: _____

Estimated Construction Dates: Start: 4/1/23 Completion: 11/1/23

Sq. Feet: 576 Estimated Cost (labor & materials): \$15,000

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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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Barn (residential) (agriculture)	<input checked="" 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"/>

Storage (Garage) (Shed) (See other side)

B Sewage Disposal (Please attach Sewer or Septic Application).

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

Proposed New Bedrooms: _____ 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 shared

E Stormwater

n/a

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.

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over

Signature of Tenant and Signature of Owner: D. DeCher

Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ <u>8000</u>	<u>2/28/23</u>
Recreation		\$ _____	<u>2/28/23</u>
Recording		\$ <u>1500</u>	<u>1/1/</u>
Certificate of Occ		\$ _____	<u>1/1/</u>
Other		\$ _____	<u>1/1/</u>

Building Permit

Approved Rejected Date 2/27/23

Issued to: David + Sharon A. Clow

Zoning Administrator: Sharon Kelly

Notes: RBS into 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**

F Diagram

Provide diagram here and include all setbacks

House
Clow

Workshop
Storage/maneuver

Drive

Manhole

Sound/shower
Clow 75'

to structure
100' 4"



16x40 Shed / Rain (Non-Business)
on 4" Slab - 150'

12' High

100'

curb
'cut'

RT-128

state app.