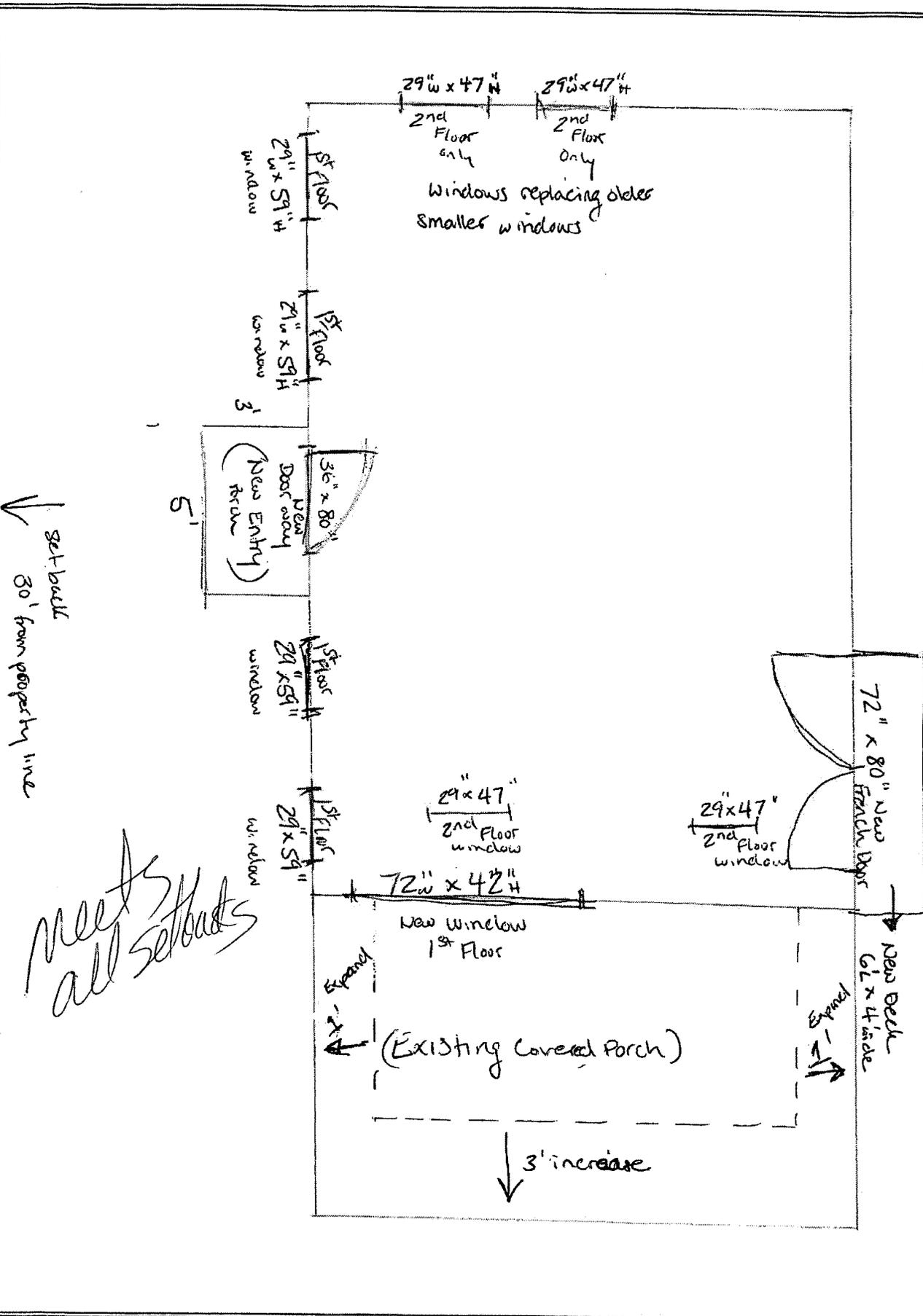


F Diagram – Provide diagram here and include all setbacks



40' front
15' sides
20' rear

Appeal Period Expires <u> / / </u>	Town of Essex, Vermont Application for Zoning Permit (Building Permit)	Application Date <u> / / </u>
Zoning District <u>R2</u>		Permit Number <u>2023-47</u>

- 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:** Paul DeForge

A

Parcel Account Numb. (Map-Parcel-Lot) 2097-001-025

Property Address: 10 BOBOLINK CIR

Owner: Paul R + Dianne T. DeForge

Owner Address: SAME

Owner Phone: (work) N/A (home) 878-2858

(cell) _____ (Email) prdeforge@contractor

Tenants name: MARK E Thibaut Phone: 9 mail. co

Cell: 802-734-1788

Estimated Construction Dates: Start: 5/16/23 Completion: 5/30/23

Sq. Feet: 16'x20' Estimated Cost (labor & materials): \$15,000

G

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 <u>replace w/ larger deck</u>	<input checked="" 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"/>

B

Sewage Disposal (Please attach Sewer or Septic Application).

Public Septic Connection Fee \$ N/A Date Paid: / /

Proposed New Bedrooms: Existing Bedrooms

C

Water (Please attach Water Service Application).

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 1/2 acre - Erosion Control Permit and Stormwater Management Permit required. Attach completed permit application.

N/A

F

Diagram - Show a sketch of project on reverse of this application with property lines, building, and setbacks or attach separate sheet.

G

over

Signature of Tenant and Signature of Owner Paul DeForge

Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ <u>15.</u>	<u>5/11/23</u>
Recreation		\$ <u> </u>	<u> / / </u>
Recording		\$ <u>15.</u>	<u>5/11/23</u>
Certificate of Occ		\$ <u> </u>	<u> / / </u>
Other		\$ <u> </u>	<u> / / </u>

Building Permit

Approved Rejected Date 5/11/23

Issued to: Paul R + Dianne T. DeForge

Zoning Administrator: Shirley Kelley

Notes: _____

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

