

Sham - 878-1343

Appeal Period Expires 8/19/22
Zoning District R1D-I

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

Application Date 8/4/22
Permit Number 2022-115

- 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:

A

Parcel Account Numb. (Map-Parcel-Lot) 2-072-010-000

Property Address: 35 Thompson Dr.

Owner: Black Bay Ventures II LLC

Owner Address: 16 Thompson Drive *David Shank*

Owner Phone: (work) 802-857-466 (home) _____
(cell) _____ (Email) _____

Tenants name: David Shank Phone: 802-238-0166
Cell: _____

Estimated Construction Dates: Start: 8/5/22 Completion: 12/1/22

Sq. Feet: _____ Estimated Cost (labor & materials): \$ 50,000

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 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"/> |

site clear on day
buffers to be maintained
SK

B

Sewage Disposal (Please attach Sewer or Septic Application).

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

Proposed New Bedrooms: _____ Existing Bedrooms N/A

C

Water (Please attach Water Service Application).

Public Well Fee \$ _____ Date Paid: 1/1 *N/A*

D

Driveway (Please attach copy of approved Curbcut / Utility Application).

Date of approval 1/1 *N/A*

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

Clearing site only

Reference PC approval # PC 2022-17

Signature of Tenant and Signature of Owner *[Signature]*

Office Use Only

| Fees: | Type | Amount | Date Pd |
|--------------------|------|---------------|----------------|
| Permit | | \$ <u>300</u> | <u>8/14/22</u> |
| Recreation | | \$ _____ | |
| Recording | | \$ <u>15.</u> | |
| Certificate of Occ | | \$ _____ | |
| Other | | \$ _____ | |

Building Permit

Approved Rejected Date 8/4/22

Issued to: Black Bay Ventures II LLC

Zoning Administrator: Sham L. Kelley

Notes: Additional permit #
fees when time for construction

C.O. Required Yes No

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

