

Appeal Period Expires <u>9/27/22</u>	Town of Essex, Vermont	Application Date <u>1/1</u>
Zoning District <u>RZ</u>	Application for Zoning Permit (Building Permit)	Permit Number <u>2022-134</u>

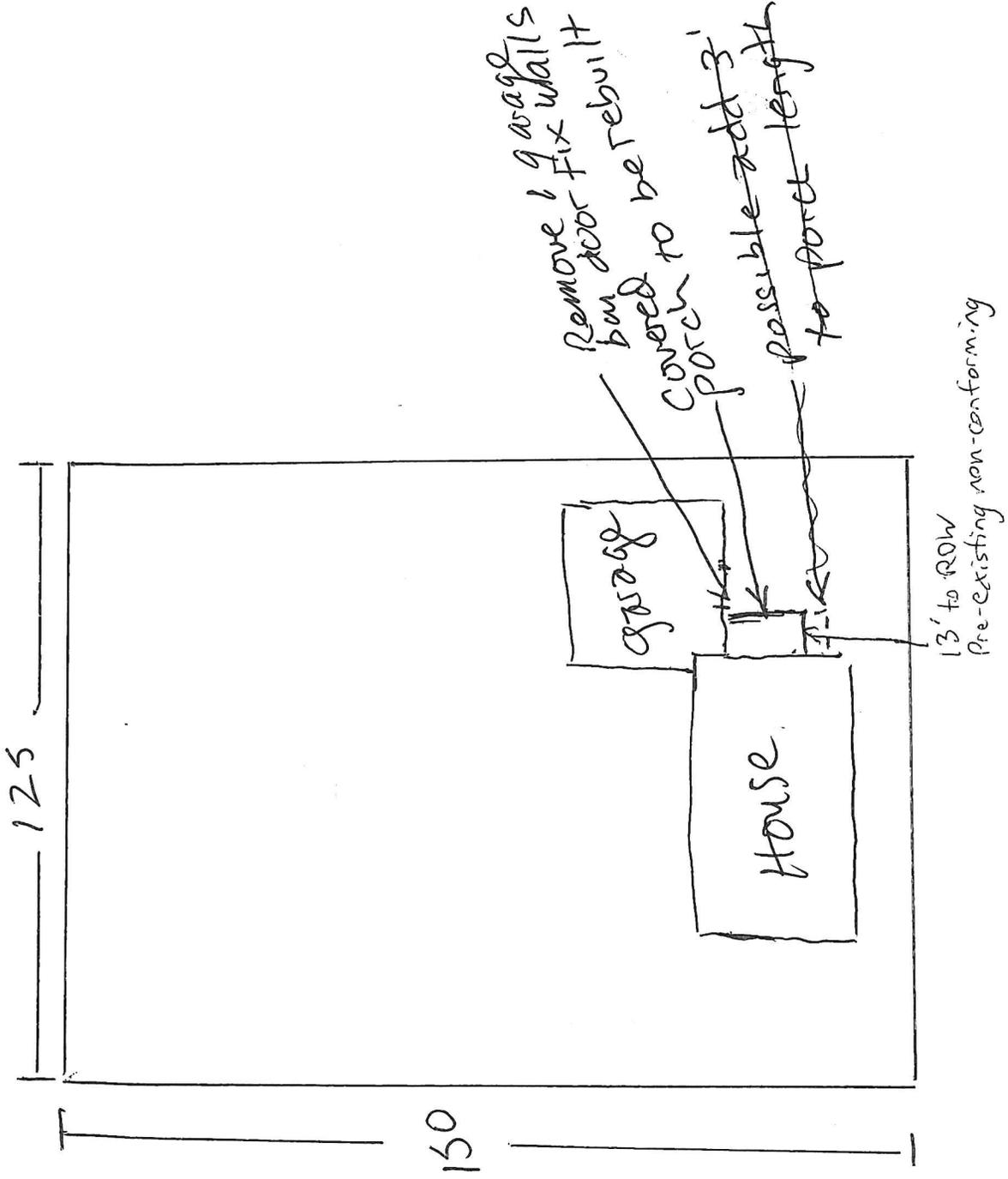
- Contact State Permit Specialist Jeff McMahon (477-2241) to check for state permitting and/or setbacks.
- Post permit card visible to the road immediately as Permit is appealable within 15 days of issuance.
- Call the Zoning Administrator at 878-1343 to schedule a Certificate of Occupancy inspection if indicated below as required.
- Call the Assessor at 878-1345 to schedule a re-assessment upon completion of work.

Signed: [Signature]

Parcel Account Numb. (Map-Parcel-Lot) 2 <u>052 019 000</u>		G																								
Property Address: <u>122 Jericho Rd</u>		Check box(es) which describe proposed use or construction (circle choice in parenthesis). N = New A = Addition R = Remodel Residential: Single Family <input type="checkbox"/> N <input type="checkbox"/> A <input type="checkbox"/> R 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 checked="" 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"/>																								
Owner: <u>Mark Kasun</u>																										
Owner Address: <u>14 Fern Street Burl 05408</u>																										
Owner Phone: (work) <u>802 310 7376</u> (home) <u>Same</u> (cell) <u>Same</u> (Email) <u>Kasunworks@</u>																										
Tenants name: <u>Jasmin Miller</u> Phone: <u>gmail</u> Cell: <u>802 355 0946</u>																										
Estimated Construction Dates: Start: <u>10/15/22</u> Completion: <u>11/15/22</u> Sq. Feet: <u>75</u> Estimated Cost (labor & materials): \$ <u>600</u>																										
A																										
B	Sewage Disposal (Please attach Sewer or Septic Application). Public <input type="checkbox"/> Septic <input checked="" type="checkbox"/> Connection Fee \$ _____ Date Paid: <u>1/1</u> Proposed New Bedrooms: _____ Existing Bedrooms _____																									
C	Water (Please attach Water Service Application). Public <input checked="" type="checkbox"/> Well <input type="checkbox"/> Fee \$ _____ Date Paid: <u>1/1</u>																									
D	Driveway (Please attach copy of approved Curbcut/Utility Application). Date of approval <u>1/1</u> <u>EXISTING</u>																									
E	Stormwater <input type="checkbox"/> Project disturbs an area greater than or equal to 1 acre – Erosion Control Permit Required. Attach completed permit application. <input type="checkbox"/> 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	<u>over</u> Signature of Tenant and Signature of Owner <u>[Signature]</u>																									
Office Use Only <table border="1"> <thead> <tr> <th>Fees:</th> <th>Type</th> <th>Amount</th> <th>Date Pd</th> </tr> </thead> <tbody> <tr> <td>Permit</td> <td></td> <td>\$ <u>75</u></td> <td><u>9/12/22</u></td> </tr> <tr> <td>Recreation</td> <td></td> <td>\$ _____</td> <td><u>1/1</u></td> </tr> <tr> <td>Recording</td> <td></td> <td>\$ <u>15</u></td> <td><u>1/1</u></td> </tr> <tr> <td>Certificate of Occ</td> <td></td> <td>\$ _____</td> <td><u>1/1</u></td> </tr> <tr> <td>Other</td> <td></td> <td>\$ _____</td> <td><u>1/1</u></td> </tr> </tbody> </table> Building Permit Approved <input checked="" type="checkbox"/> Rejected <input type="checkbox"/> Date <u>9/12/22</u> Issued to: <u>Mark Kasun</u> Zoning Administrator: <u>[Signature]</u> Notes: _____ C.O. Required Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			Fees:	Type	Amount	Date Pd	Permit		\$ <u>75</u>	<u>9/12/22</u>	Recreation		\$ _____	<u>1/1</u>	Recording		\$ <u>15</u>	<u>1/1</u>	Certificate of Occ		\$ _____	<u>1/1</u>	Other		\$ _____	<u>1/1</u>
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**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



Tericho BC