

Appeal Period Expires 8.1.17
 Zoning District R1

Town of Essex, Vermont
Application for Zoning Permit
 www.essex.org

Application Date 2/1/94
 Permit Number 2017-94

All construction is to be completed in accordance with the Town of Essex Zoning Regulations and any/all federal or state regulations now in effect. You are required to post this permit in a conspicuous location on the property during the appeal period and it must remain posted throughout the construction period. You are required to contact the necessary state agencies to obtain state permits @ 477-2241 (Jeff McMahon, Permit Specialist).

Any interested person may appeal the decision of the Zoning Administrator to the Zoning Board of Adjustment within fifteen (15) days of the permit's date of issuance. Commencing construction within this fifteen (15) day appeal period is prohibited by law.

Signed: [Signature]

A Parcel Account Num. (Map-Parcel-Lot) 2-010-051-000
 (found in Town Assessor's Office)
 Property Address: 22 Old Stage Rd
 Owner: ESAD Boskailo + Fatima Boskailo
 Owner Address: SARNO
 Owner Phone: (work) _____ (home) _____
 * (cell) 802-881-4992 (Email) _____
 Contractors name: SELF Phone: _____
 (son) → Adnan Cell: 881-9466
 Estimated Construction Dates: Start: 8.1.17 Completion: 3.1.18
 Sq. Feet: 384-garage Estimated Cost (labor & materials): \$ 8,000+/-
1547

B Sewage Disposal (Please attach Sewer or Septic Application).
 Public Private Connection Fee \$ _____ Date Paid: 1/1
 Proposed New Bedrooms: 1 Existing Bedrooms (+transfer, bedroom to apt.)
WW-4-3896-1

C Water (Please attach Water Service Application).
 Public Private Fee \$ 343.80 Date Paid: 7.17.17
OK

D Driveway (Please attach copy of approved Curbcut / Utility Application).
 Date of approval 1/1/18 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 (this is a corner lot)
This is a single see attached family house with 1 Accessary apt. only.
 Signature of Tenant and Signature of Owner [Signature]

G

Check box(es) which describe proposed use or construction (circle choice in parenthesis).
 N = New A = Addition R = Remodel

Residential: Accessory Apt N A R
 Single Family + interior remodel
 Two-family (duplex)(other) to house
 Multi-family
 Condominium / Townhouse
 Mobile home
 Inclusions or Additions: change to 2 BAY / 1 story
 Garage (attached) attached
 Porch (enclosed) (open) 1 bay addition
 Deck
 Pool (in) (above) ground
 Shed
 Barn (residential) (agriculture)
 Non-residential:
 Commercial / Industrial
 Stormwater:
 Stormwater
 Erosion Control
 Other:
 Change in use
 Miscellaneous
 Renewal

Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ <u>50.</u>	<u>7.17.17</u>
Recreation		\$ _____	
Recording		\$ <u>20.</u>	<u>7.17.17</u>
Certificate of Occ		\$ <u>75</u>	
Other		\$ _____	

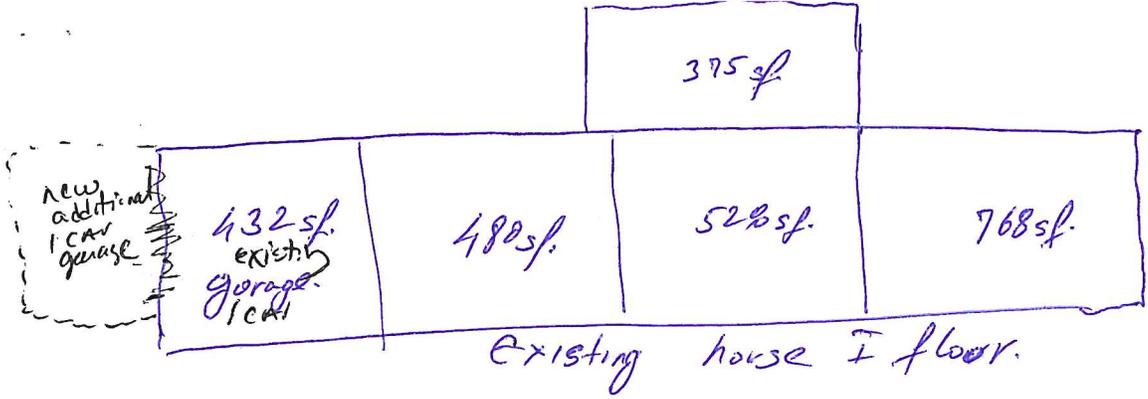
Building Permit
 Approved Rejected Date 7.17.17
 Issued to: E. Boskailo + F. Bastalio
 Zoning Administrator: Sharon L. Kelly
 Notes: Energy code given
 C.O. Required Yes No

THIS PERMIT VALID FOR TWELVE (12) MONTHS FROM DATE OF ISSUE

02/13/17

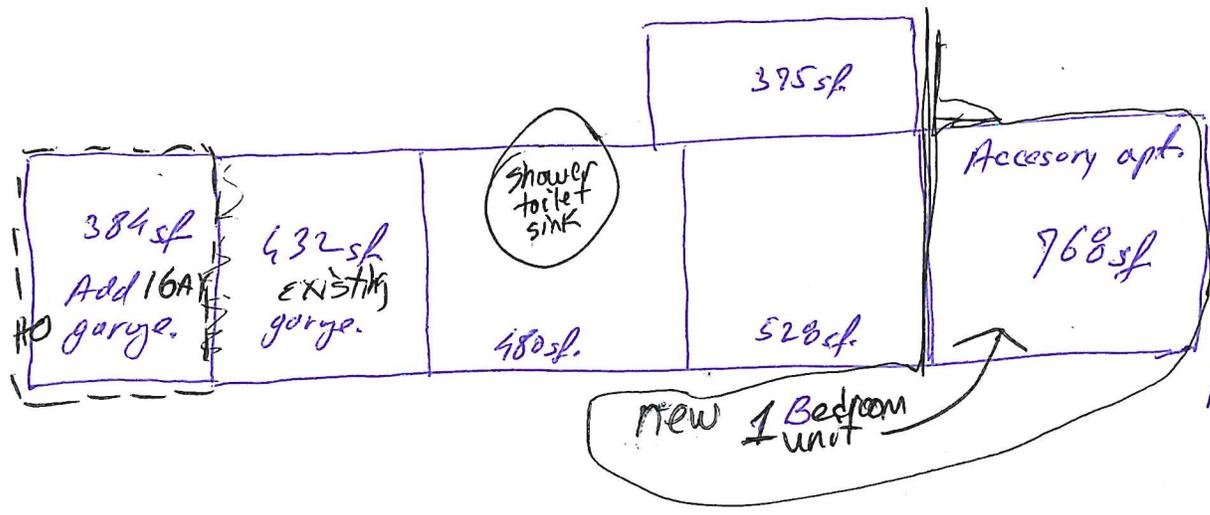
6-26-18 - renew permit for garage, new expiration date is 7-17-19 (SK)

F **Diagram** – Provide diagram here and include all setbacks



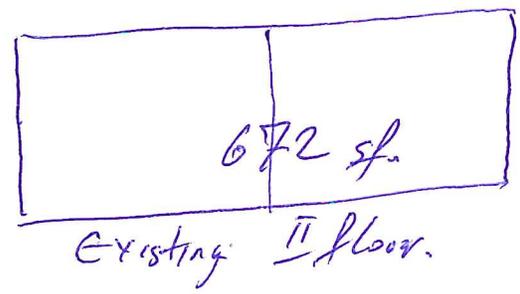
375 for stairs
 768
 528
 480
 672 II floor -

Total exist = 2823

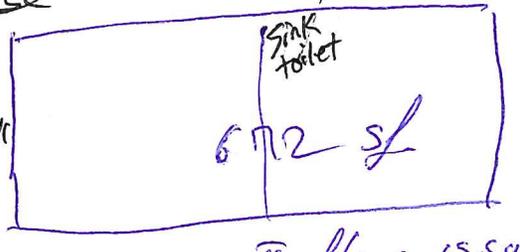


New
 Main house
 2055

Accessory apt.
 768
 < 30%



full
 Existing: 1 bath in house
 resulting: primary house
 will have shower, toilet, sink
 on 1st floor; and
 sink + toilet on 2nd floor



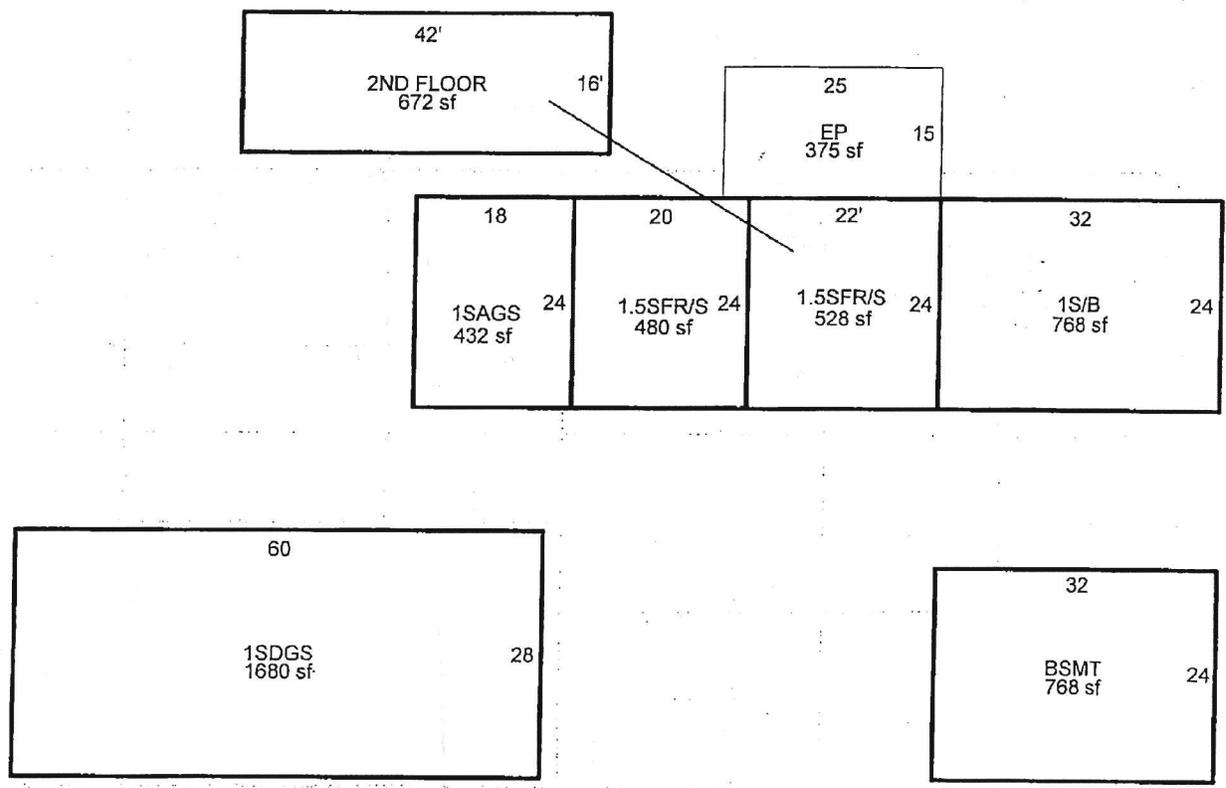
New II floor is same.

SKETCH/AREA TABLE ADDENDUM

Parcel No 2010051000

SUBJECT	Property Address 22 Old Stage Rd		
	City Essex (Town)	State VT	Zip 05452
	Owner		
	Client		
	Appraiser Name		

IMPROVEMENTS SKETCH



AREA CALCULATIONS

AREA CALCULATIONS SUMMARY					
Code	Description	Factor	Net Size	Perimeter	Net Totals
1FL1	1.5SFR/S	1.00	528	92	1776
	1S/B	1.00	768	112	
	1.5SFR/S	1.00	480	88	
1FL2	2ND FLOOR	1.00	672	116	672
1BS	BSMT	1.00	768	112	768
GAR11	1SAGS	1.00	432	84	432
GAR12	1SDGS	1.00	1680	176	1680
P/P11	EP	1.00	375	80	375
Net BUILDING Area (rounded w/ factors)					2448

Comment Table 1	
Comment Table 2	Comment Table 3

SKETCH/AREA TABLE ADDENDUM

Parcel No 2010051000

Property Address 22 Old Stage Rd

City Essex (Town)

State VT

Zip 05452

Owner

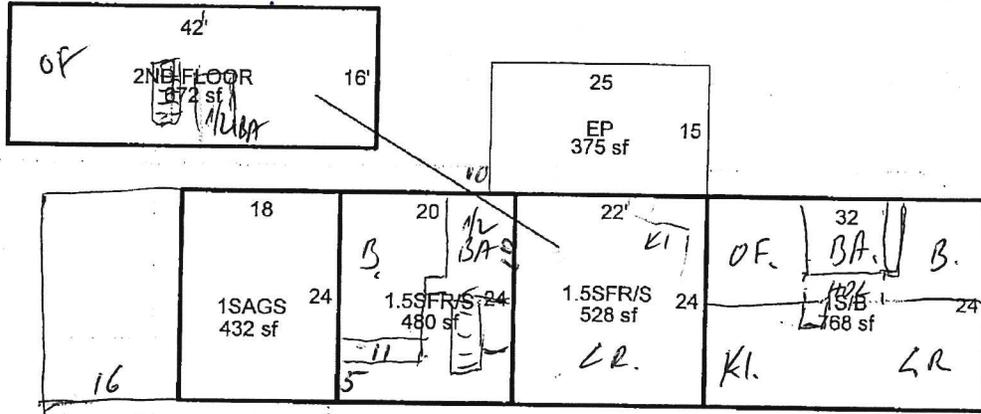
Client

Appraiser Name

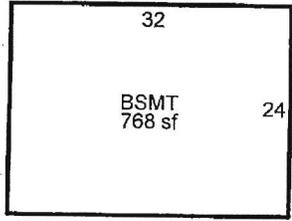
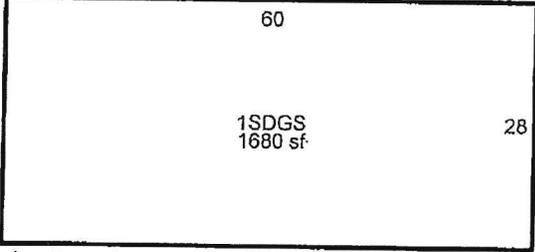
SUBJECT

IMPROVEMENTS SKETCH

400' +/-
front



47' front



CORNER LOT

Scale: 1" = 10'

AREA CALCULATIONS SUMMARY

Code	Description	Factor	Net Size	Perimeter	Net Totals
1FL1	1.5SFR/S	1.00	528	92	
	1S/B	1.00	768	112	
	1.5SFR/S	1.00	480	88	
1FL2	2ND FLOOR	1.00	672	116	1776
LBS	BSMT	1.00	768	112	672
GAR11	1SAGS	1.00	432	84	768
GAR12	1SDGS	1.00	1680	176	432
P/P11	EP	1.00	375	80	1680
					375

Comment Table 1

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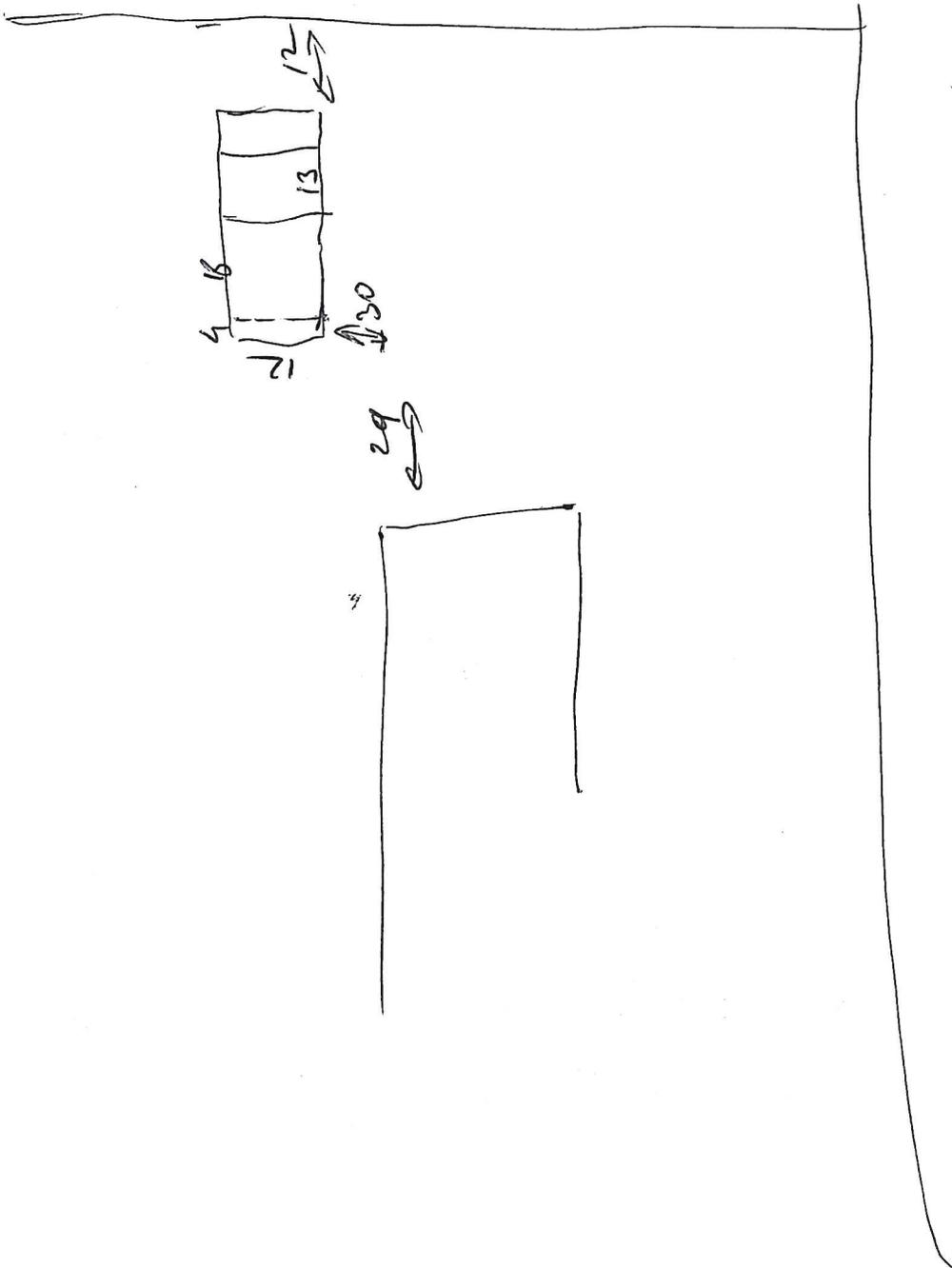
Comment Table 2

Comment Table 3

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Net BUILDING Area (rounded w/ factors) 2448

AREA CALCULATIONS



Town of Essex
Application for Water Service

Revised April 2016

The undersigned, being the owner / owner's agent of the property located at:

Street Address: 22 Old Stage Rd Development: R1 Zone

Tax Map # 010 Tax Parcel 051 Tax Lot 000

Does hereby request a permit to initiate water service as noted below to

serve _____ unit(s) Residential Commercial Industrial structure

Accessory
Apt.

Installer / Contractor:

Property Owner:

Name: _____

Name: ESAD BOSTA; LO; FATIMA BASTALIO

Address: _____

Address: SAME

Phone: _____

Phone: _____

Cell: _____

Cell: 802-881 4492

Firm Performing Main Line Tap:

Name: _____

Existing

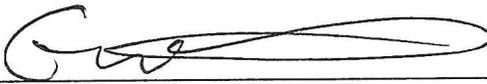
Address: _____

Phone: _____

Cell: _____

- 1.) The above requested service includes the installation of a 3/4" x 5/8" water meter for residential use and up to a 2" simple meter for non-residential use. The information necessary to determine the correct meter size shall be supplied by the applicant (minimum to maximum range of use). Meters 5/8", 3/4" and 1" shall be installed by the Town. Meters above 1" shall be installed by the owner/applicant or qualified representative.
- 2.) Property owner / agent is responsible for and must provide all necessary excavation form the main to the building or structure.
- 3.) Property owner / agent agrees to provide the Town a minimum of 24 hours notice prior to installation for inspection purposes. No part of the water line may be covered until it has been inspected by the Town Representative.
- 4.) Property owner / agent agrees to restore all disturbed areas to original condition after the installation of said water service.
- 5.) The water service can be turned on only by an employee of the Town of Essex Water Department.
- 6.) Meter spacers must be obtained from the Town of Essex Water Department.
- 7.) The owner / agent agrees that all installation and work will conform to the Town Public Works Specifications and the Water Ordinance and Regulations of the Town of Essex.

8.) In consideration of water service supplied by the Town of Essex Water Department, I agree to be responsible for payment of all bills rendered and for all water used by me, my tenants, successors in tenancy or in ownership, and all persons at above locations, unless and until proper notice is given to the Town Water Department of termination of service on a specific date. I also agree to abide by all rules and regulations established by the Essex Water Department.

Signed:  Date: 7/17/17

PLEASE MAKE CHECK PAYABLE TO TOWN OF ESSEX WATER AND SEWER DEPARTMENT.
DO NOT COMBINE WITH ZONING PERMIT FEE.

All water services are subject to a service initiation fee as set by the Water/Sewer Fee Schedule adopted by the Selectboard. The following fee schedule shall apply to all municipal water connections.

FOR OFFICE USE ONLY:

60 gallons/day x \$ 5.73 = \$ 343.80 + \$1,000 = \$ 343.80

Connection Fee: \$ _____ Rcvd by: _____ Date: ____-____-____ Finance Notified

Approved by: _____ Date: ____-____-____ Letter Sent Finance Notified

Inspected by: _____ Date: ____-____-____ Tie Drawing Finance Notified

Meter Installed Date: ____-____-____

Master List Updated: Approved Inspected Metered