

Appeal Period Expires 8,19,17
 Zoning District B/C2/P2

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

Application Date 1/1
 Permit Number 2017-115

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) 2-009-003-026
 (found in Town Assessor's Office)
 Property Address: 2 Bushey Ln, Dean Henry dbla
 Owner: Ormond Bushey and Sons Colysey
 Owner Address: 2 Bushey Ln Essex Jct
 Owner Phone: (work) 872-8110 (home) _____
 *(cell) 598-4069 (Email) dean@busheyandsons.com
 Contractors name: Ormond Bushey & Sons Phone: 872-8110
 Cell: 598-4069
 Estimated Construction Dates: Start: 8/15/17 Completion: 9/15/17
 Sq. Feet: 624 Estimated Cost (labor & materials): \$47,000

G

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"/>	<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 checked="" type="checkbox"/>	<input type="checkbox"/>
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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"/>

truck scale (in ground)

B Sewage Disposal (Please attach Sewer or Septic Application).
 Public Private Connection Fee \$ _____ Date Paid: 1/1
 Proposed New Bedrooms: _____ Existing Bedrooms _____

C Water (Please attach Water Service Application).
 Public Private Fee \$ _____ Date Paid: 1/1

D Driveway (Please attach copy of approved Curbcut / Utility Application).
 Date of approval 1/1 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

see attached

Signature of Tenant and Signature of Owner [Signature]

Office Use Only

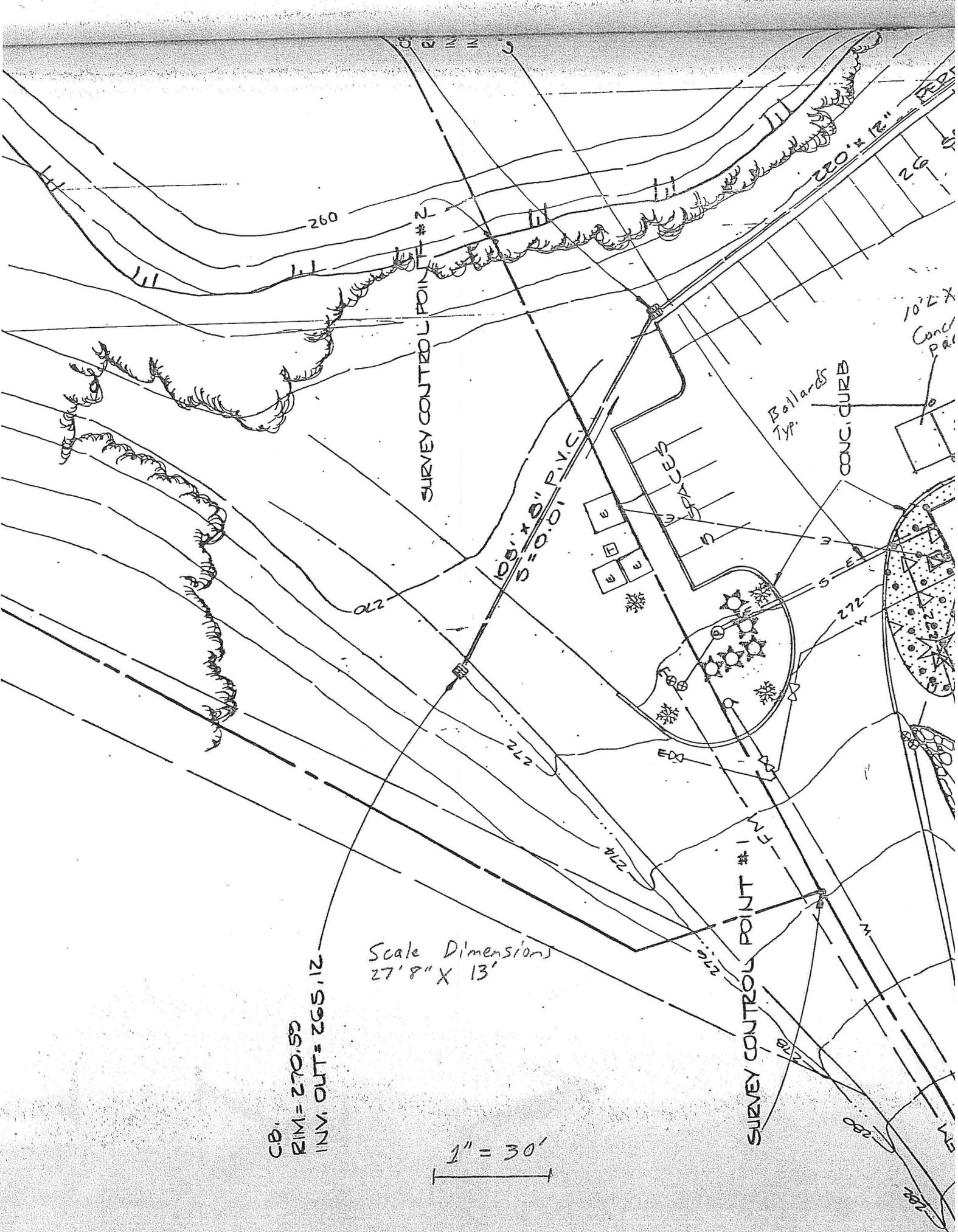
Fees:	Type	Amount	Date Pd
Permit		\$ <u>141.-</u>	<u>1/1</u>
Recreation		\$ _____	<u>8/2/17</u>
Recording		\$ <u>20.</u>	<u>1/1</u>
Certificate of Occ		\$ <u>75</u>	<u>1/1</u>
Other		\$ _____	<u>1/1</u>

Building Permit
 Approved Rejected Date 8/4/17
 Issued to: Dean Bushey dbla Colysey Enterprises
 Zoning Administrator: Thom L. Felley

Notes: _____

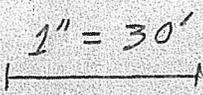
C.O. Required Yes No

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



C.B.
 R.I.M. = 270.50
 I.N.V. OUT = 265.12

Scale Dimensions
 27' 8" X 13'



10' x 10' Conc. Pad

Ballards Typ. CONC. CURB

SURVEY CONTROL POINT #1

SURVEY CONTROL POINT #2

108' x 8' P.V.C.
S = 0.01

STAIRS

272

274

276

280

260

262

272

274

276

220' x 12"

260

10' x 10'

Conc. Pad

10' x 10'

Conc. Pad