

Appeal Period Expires <u>11/15/17</u>	<b>Town of Essex, Vermont</b>	Application Date <u>1/1/17</u>
Zoning District <u>C2/AR</u>	<b>Application for Zoning Permit</b>	Permit Number <u>2017-163</u>
www.essex.org		

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: Ted Lavallee

**A**

Parcel Account Numb. (Map-Parcel-Lot) 2-011-029-000  
(found in Town Assessor's Office)

Property Address: 111-113-115 Browns River rd

Owner: Ted Lavallee, Theodorah <sup>Essex</sup>

Owner Address: 1601 Rte 128 Westford, V.T.

Owner Phone: (work) \_\_\_\_\_ (home) \_\_\_\_\_  
(cell) 881-9013 (Email) tlav202@aol.com

Contractors name: Toed Elges Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Estimated Construction Dates: Start: 7/15/17 Completion: 9/17/17

Sq. Feet: \_\_\_\_\_ Estimated Cost (labor & materials): \$ 4700.

**G**

Check box(es) which describe proposed use or construction (circle choice in parenthesis).

N = New A = Addition R = Remodel

Residential: After the fact

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

**B**

Sewage Disposal (Please attach Sewer or Septic Application)

Public  Private  Connection Fee \$ \_\_\_\_\_ Date Paid: 1/1/17

Proposed New Bedrooms: \_\_\_\_\_ Existing Bedrooms: \_\_\_\_\_

**C**

Water (Please attach Water Service Application)

Public  Private  Fee \$ \_\_\_\_\_ Date Paid: 1/1/17

**D**

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

Date of approval 1/1/17

**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**

Signature of Tenant and Signature of Owner Ted Lavallee

**Office Use Only**

Fees:	Type	Amount	Date Pd
Permit		\$ <u>50</u>	<u>10/31/17</u>
Recreation		\$ _____	_____
Recording		\$ <u>10.</u>	<u>10/31/17</u>
Certificate of Occ		\$ _____	_____
Other		\$ _____	_____

Approved  Building Permit Rejected  Date 10/31/17

Issued to: T. Lavallee

Zoning Administrator: Sharon L. Kelley

Notes: \_\_\_\_\_

C.O. Required Yes  No

F Diagram - Provide diagram here and include all setbacks

111 2 front increase opening to egress window size  
1 back "

113 1 Front Window to meet egress size

115 same as 111