

Appeal Period Expires 8/19/16
 Zoning District I1

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

Application Date 1/1
 Permit Number 2016-128

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: _____

A

Parcel Account Num. (Map-Parcel-Lot) 2 052-004-004
 (found in Town Assessor's Office)
 Property Address: 4 MORSE DRIVE
 Owner: THE EDGE Slots Fitness Edge Inc
 Owner Address: 142 W. WINDY OAKS TR. SECON BLDG.
 Owner Phone: (work) 659-0001 (home) _____
 (cell) _____ (Email) nick@edgefit.com
 Contractors name: ALAN TROWLEY Phone: 802-658-3224
 Cell: 363-3488
 Estimated Construction Dates: Start: 8/17/16 Completion: 8/13/16
 Sq. Feet: 2600 Estimated Cost (labor & materials): \$6000.00

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 NA

E

Stormwater NA
 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 _____

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 checked="" 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"/>

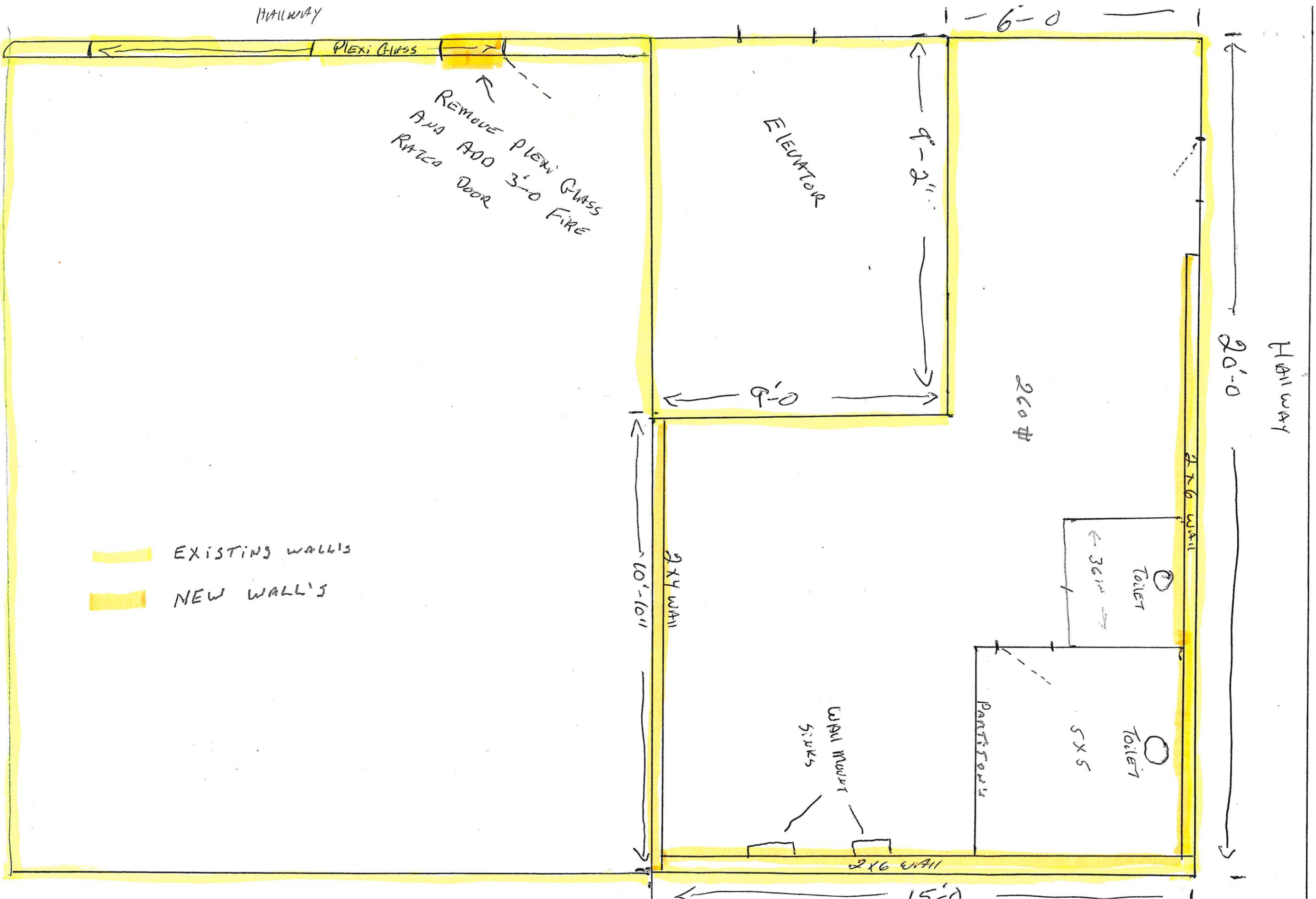
Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ 100	8/19/16
Recreation		\$ 1.00	1/1
Recording		\$ 10	8/19/16
Certificate of Occ		\$ 75.00	1/1
Other		\$	1/1

Building Permit
 Approved Rejected Date 8/19/16
 Issued to: Slots Fitness Edge Inc
 Zoning Administrator: Shawn L Kelley
 Notes: Energy code given

C.O. Required Yes No

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



EXISTING WALLS
 NEW WALL'S

REMOVE PLEXI GLASS
 AND ADD 3'-0 FIRE
 RATED DOOR

ELEVATOR

20'0"

2x6 WALL

TOILET

TOILET

5x5

PARTITION

WALL MOUNT
SINKS

2x6 WALL

15'-0"

HALLWAY

HALLWAY

PLEXI GLASS

6'-0"

9'-2"

9'-0"

2x4 WALL
10'-10"

20'-0"