

Appeal Period Expires 10/17/15
 Zoning District RZ

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

Application Date 10/02/15
 Permit Number 2015-163

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 Numb. (Map-Parcel-Lot) 2-099-003-030
 (found in Town Assessor's Office)
 Property Address: 19 Fox Run Road, Essex
 Owner: Aaron & Kate Stone
 Owner Address: 19 Fox Run rd, Essex VT
 Owner Phone: (work) 802-655-5040 (home) _____
 (cell) 802-922-5254 (Email) stoneaaron@hotmail.com
 Contractors name: Aaron Stone Phone: as above
 Cell: as above
 Estimated Construction Dates: Start: ___/___/11 Completion: ___/___/11
 Sq. Feet: 600 Estimated Cost (labor & materials): \$ 10,000

G

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

<i>Residential:</i>	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"/>
<u>Condominium / Townhouse</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mobile home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Inclusions or Additions:</i>			
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"/>
<i>Non-residential:</i>			
Commercial / Industrial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Stormwater:</i>			
Stormwater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Erosion Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Other:</i>			
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: ___/___/___
 Proposed New Bedrooms: 1 Existing Bedrooms 2

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

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

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 OVER
 Signature of Tenant and Signature of Owner [Signature]
 Homeowner's Association approval attached

Office Use Only

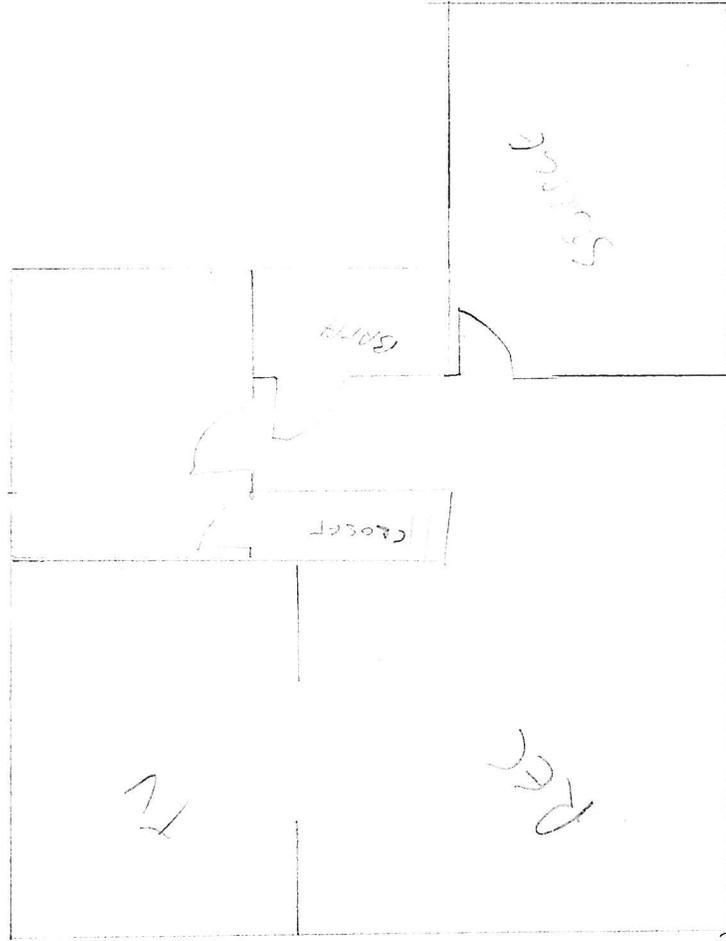
Fees	Type	Amount	Date Pd
Permit		\$ <u>500</u>	<u>10/2/15</u>
Recreation		\$ _____	<u>10/2/15</u>
Recording		\$ <u>10</u>	<u>1/1</u>
Certificate of Occ		\$ _____	<u>1/1</u>
Other		\$ _____	<u>1/1</u>

Building Permit
 Approved Rejected Date 10/12/15
 Issued to: AARON S. & KATE S. Stone
 Zoning Administrator: [Signature]
 Notes: The applicant was informed to check with the state regarding building codes in preparation to licensure
 C.O. Required Yes No

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

F Diagram – Provide diagram here and include all setbacks

We are changing the status of the upstairs "DEN" to a 3rd bedroom.
Finishing 600' +/- of basement to accommodate living space.



Sharon Kelley

From: Gberian@aol.com
Sent: Friday, October 02, 2015 4:52 PM
To: Sharon Kelley
Cc: aaron@rrcharleboisinc.com
Subject: 19 Fox Run Road

Hi Ms. Kelley,

My name is Gary Berian - I am the president of the Mansfield Townhome Condominium Assoc - I wanted to send you a note regarding 19 Fox Run Road - Aaron Stone's property

This is a 3 bedroom home with a partially finished basement - as are most of the units in the townhome development - this is as most of the units were originally built.

Should you need further information or have any questions please do not hesitate to contact me.

Best regards, Gary Berian (802) 233-0841

