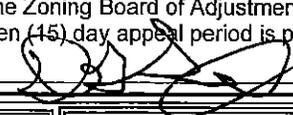


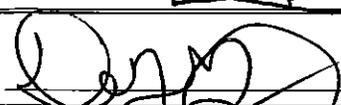
\* 12-1-14: The Landowner did not add a bedroom, however relocated the 3rd bedroom from the 1st floor to the second floor. The closet will be removed from the 4th bedroom.

Appeal Period Expires <u>10/4/14</u>	Town of Essex, Vermont	Application Date <u>1/1/14</u>
Zoning District <u>R2</u>	<b>Application for Zoning Permit</b>	Permit Number <u>2014-147</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 @ 879-5676.

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: 

Parcel Account Num. (Map-Parcel-Lot) 2- <u>062-003022</u> (found in Town Assessor's Office)		<b>G</b>	
Property Address: <u>3 Greenfield Ct</u>		Check box(es) which describe proposed use or construction (circle choice in parenthesis). N = New A = Addition R = Remodel	
Owner: <u>Daniel + CLARE E. Gilligan</u>		Residential: N A R	
Owner Address: <u>3 Greenfield Ct</u>		Single Family <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
A	Owner Phone: (work) <u>(802) 318-1156</u> (home) <u>(802) 872-2794</u>	Two-family (duplex)(other) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	(cell) <u>(802) 233-5571</u> (Email) <u>dgilligan332@comcast.net</u>	Multi-family <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Contractors name: _____ Phone: _____		Condominium / Townhouse <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Cell: _____		Mobile home <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Estimated Construction Dates: Start: <u>10/8/14</u> Completion: <u>11/8/14</u>		Inclusions or Additions:	
Sq. Feet: <u>N/A</u> Estimated Cost (labor & materials): \$ <u>1,500</u>		Garage (attached) (detached) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Sewage Disposal (Please attach Sewer or Septic Application).		Porch (enclosed) (open) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
B	Public <input type="checkbox"/> Private <input type="checkbox"/> Connection Fee \$ _____ Date Paid: <u>1/1/14</u>	Deck <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	Proposed New Bedrooms: <u>1</u> Existing Bedrooms: <u>3</u> <u>See septic permit # 107-1977 attached</u>	Pool (in) (above) ground <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Water (Please attach Water Service Application).		Shed <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
C	Public <input checked="" type="checkbox"/> Private <input type="checkbox"/> Fee \$ _____ Date Paid: <u>1/1/14</u>	Barn (residential) (agriculture) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	Driveway (Please attach copy of approved Curbcut / Utility Application).	Non-residential:	
D	Date of approval <u>1/1/14</u> <u>EXISTING</u>	Commercial / Industrial <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	Stormwater	Stormwater: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
E	<input type="checkbox"/> Project disturbs an area greater than or equal to 1 acre - Erosion Control Permit Required. Attach completed permit application.	Erosion Control <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	<input type="checkbox"/> 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.	Other:	
F	Diagram - Show a sketch of project on reverse of this application with property lines, building, and setbacks or attach separate sheet. (Instruction sheet available upon request.)	Change in use <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	<u>Split a 20' by 16' room in half to make 2 bedrooms</u>	Miscellaneous <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
G	Signature of Tenant and Signature of Owner 	Renewal <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
		Office Use Only	
		Fees: Type Amount Date Paid	
		Permit \$ <u>50.00</u> <u>9/19/14</u>	
		Recreation \$ _____	
		Recording \$ <u>20.00</u> <u>9/19/14</u>	
		Certificate of Occ \$ _____	
		Other \$ _____	
		Building Permit	
		Approved <input checked="" type="checkbox"/> Rejected <input type="checkbox"/> Date <u>9/19/14</u>	
		Issued to <u>Daniel + Clare Gilligan</u>	
		Zoning Administrator <u>Shuan Kelly</u>	
		Notes: <u>emay code given</u>	
		<u>SEE NOTE ABOVE</u>	
		C.O. Required Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

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