

Appeal Period Expires 5-30-13  
 Zoning District R2

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

Application Date 1-1-13  
 Permit Number 2013-71

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 and it must remain posted throughout the construction period.

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.

Occupancy of the premises shall not take place until a Certificate of Occupancy is obtained.

Approval is subject to accuracy of information provided by the applicant.

**A**

Parcel Account Numb. (Map-Parcel-Lot) 2-055-008-098  
(found in Town Assessor's Office)

Property Address: 15 Prescott St, Essex Jct

Owner: Susan Blonski & Thomas J.

Owner Address: 15 Prescott St, Essex Jct

Owner Phone: (work) 764 5201 (home) 878 4082  
 (cell) \_\_\_\_\_ (Email) \_\_\_\_\_

Contractors name: Self Phone: \_\_\_\_\_  
(weekend) Cell: \_\_\_\_\_

Estimated Construction Dates: Start: 6-1-12 Completion: 6-1-12

Sq. Feet: 96 <sup>12x8</sup> Estimated Cost (labor & materials): \$ 400

**G**

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

N = New A = Addition R = Remodel

<b>Residential:</b>	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"/>
Vacation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Inclusions or Additions:</b>			
Garage (attached) (detached)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Porch (enclosed) (open)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<del>Deck</del>	<input checked="" 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"/>
<b>Non-residential:</b>			
Retail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Industrial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Other:</b>			
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: 1-1-13

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

**C**

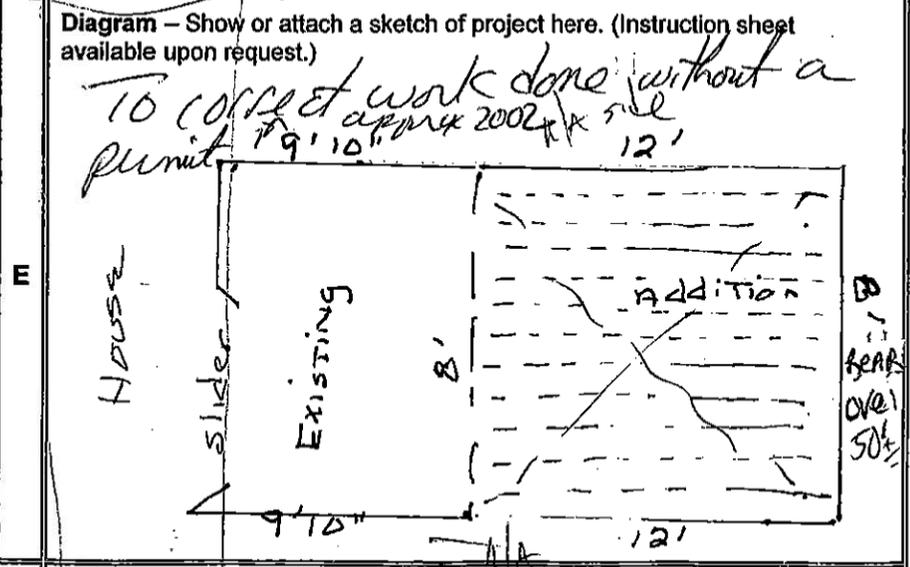
Water (Please attach Water Service Application).

Public  Private  Fee \$ \_\_\_\_\_ Date Paid: 1-1-13

**D**

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

Date of approval 1-1-13



**Office Use Only**

Fees:	Type	Amount	Date Pd
	Permit	\$ <u>50</u>	<u>5/15/13</u>
	School	\$ _____	<u>1-1-13</u>
	Recreation	\$ _____	<u>1-1-13</u>
	Recording	\$ <u>10</u>	<u>5/15/13</u>
	Other	\$ _____	<u>1-1-13</u>

Building Permit  
 Approved  Rejected  Date 5/15/13

Issued to: SUSAN BLONSKI

Zoning Administrator: Shawn Kelly

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

C.O. Required Yes  No

**F** Signature of Owner \_\_\_\_\_

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

*septic area*

(web) 11/01/04