

Appeal Period Expires <u>10/2/13</u>	<b>Town of Essex, Vermont</b> <b>Application for Zoning Permit</b> www.essex.org	Application Date <u>9/13/13</u>
Zoning District <u>11</u>		Permit Number <u>2013-145</u>

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: \_\_\_\_\_

**A.** Parcel Account Numb. (Map-Parcel-Lot) 2- 009-001-003  
(found in Town Assessor's Office)  
Property Address: 20 NEW ENGLAND DRIVE  
Owner: REM Development LLC  
Owner Address: 599 Avenue O Williston  
Owner Phone: (work) 802-864-5830 (home) \_\_\_\_\_  
(cell) \_\_\_\_\_ (Email) boiler@remdev.com  
Contractors name: OTTER CREEK Phone: 864-3007  
\*734-3456 Cell: \_\_\_\_\_  
Estimated Construction Dates: Start: 10/1/13 Completion: 10/31/13  
Sq. Feet: \_\_\_\_\_ Estimated Cost (labor & materials): \$4,000

**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"/>
Condominium / Townhouse	<input type="checkbox"/>	<input type="checkbox"/>	<input 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: 1/1  
Proposed New Bedrooms: \_\_\_\_\_ Existing Bedrooms NA

**C.** Water (Please attach Water Service Application).  
Public  Private  Fee \$ \_\_\_\_\_ Date Paid: NA

**D.** Driveway (Please attach copy of approved Curbcut / Utility Application).  
Date of approval 1/1 NA

**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. (Instruction sheet available upon request.)  
See attached

**G.** Signature of Tenant and Signature of Owner  
[Signature]  
[Signature]

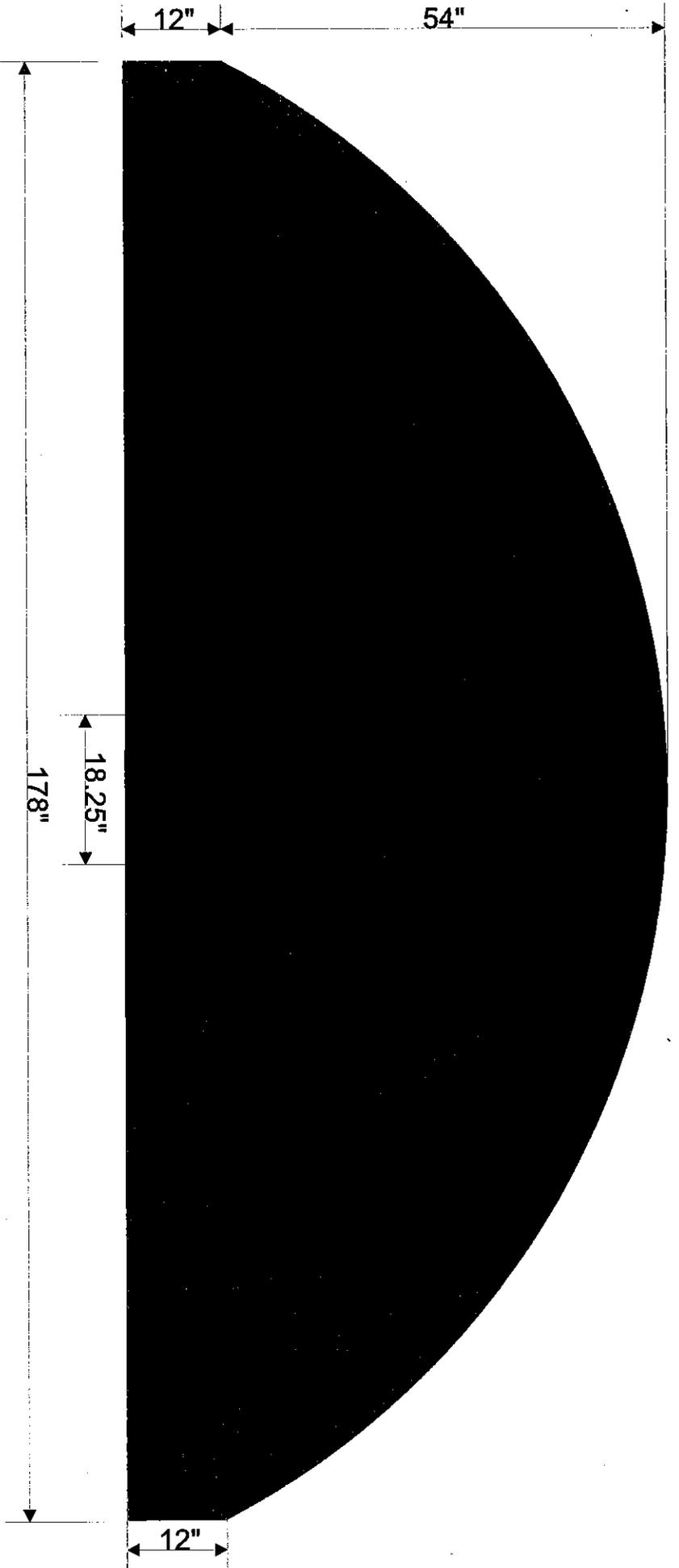
**Office Use Only**

Fees:	Type	Amount	Date Pd.
Permit		\$100.00	9/16/13
Recreation		\$	
Recording		\$20.00	9/16/13
Certificate of Occ		\$75.00	9/16/13
Other		\$	

**Building Permit**

Approved  Rejected  Date: 9/17/13  
Issued to: REM Dev LLC + Food Science  
Zoning Administrator: Shawn Kelly  
Notes: \_\_\_\_\_

C.O. Required Yes  No



2013-145

 <p><b>OTTER CREEK</b> Awnings • Sunrooms Since 1976</p> <p>19 Echo Place, Williston, VT 05495 Phone: 802.864.3009 Fax: 802.860.9450</p>		Approved by _____ Date _____ PROOF # 1 Drawing by: njf	
<b>Job Information</b> Customer: OCAM Contact: Rene Paquette Tel.#: (802) 864-3009 Fax #: (802) 660-9450 Job #: 13-11844 Client: Food Service Date: August 23, 2013		<b>Fabric</b> Body Brand: Sunbrella Color: Heather Beige #: 4672 Valance Brand: Same Color: #:	
<b>Graphics</b> Application: SGS Location: Face Size: 12" Style/Font: Goudy Bold Case: Numbers Color: Forest Green 225-66 Position: Center l/r Up 12"		<b>Quantity:</b> (1) Number <b>Graphics Area:</b> 1.52 sq ft	

For timely delivery please sign and return this proof by:

- Please carefully proof the following and check the appropriate boxes:
- MEASUREMENTS
  - SPELLING
  - GRAPHIC/TEXT LOCATION
  - FABRIC & COLOR
  - GRAPHIC/TEXT COLOR
  - TYPE OF APPLICATION