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| Appeal Period Expires <u>11/5/13</u> Zoning District <u>E2</u> | Town of Essex, Vermont Application for Zoning Permit www.essex.org | Application Date <u>10/21/13</u> Permit Number <u>2013-163</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 Num. (Map-Parcel-Lot) <u>2-062-003-011</u> <small>(found in Town Assessor's Office)</small> Property Address: <u>49 Springfield Rd</u> Owner: <u>Dominic Cloud + Amanda Lafferty</u> Owner Address: <u>48 Springfield Rd Lafferty</u> Owner Phone: (work) <u>524-1500</u> (home) <u>876 7086</u> (cell) <u>303-1775</u> (Email) <u>D.Cloud@STALKERS.VT.COM</u> Contractors name: <u>John Paul</u> Phone: _____ Cell: <u>825-4633</u> Estimated Construction Dates: Start <u>11/5/13</u> Completion: <u>1/1</u> Sq. Feet: _____ Estimated Cost (labor & materials): <u>\$27,000</u> | G | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| B Sewage Disposal (Please attach Sewer or Septic Application). Public <input type="checkbox"/> Private <input checked="" type="checkbox"/> Connection Fee \$ _____ Date Paid: <u>1/1</u> Proposed New Bedrooms: _____ Existing Bedrooms <u>see permit # 44-5-1978</u> | Check box(es) which describe proposed use or construction (circle choice in parenthesis). N = New A = Addition R = Remodel <table style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;"><i>Residential:</i></td> <td style="text-align: center; padding: 2px;">N</td> <td style="text-align: center; padding: 2px;">A</td> <td style="text-align: center; padding: 2px;">R</td> </tr> <tr> <td style="padding: 2px;">Single Family</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 2px;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Two-family (duplex)(other)</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Multi-family</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> <td style="text-align: center; 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padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Renewal</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> </table> | <i>Residential:</i> | N | A | R | Single Family | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" 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 checked="" type="checkbox"/> | <input type="checkbox"/> | Deck | <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"/> | <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"/> |
| <i>Residential:</i> | | N | A | R | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Single Family | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" 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 checked="" type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Deck | <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"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <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"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| C Water (Please attach Water Service Application). Public <input checked="" type="checkbox"/> Private <input type="checkbox"/> Fee \$ _____ Date Paid: <u>1/1</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| D Driveway (Please attach copy of approved Curbcut / Utility Application). Date of approval <u>1/1</u> <u>N/A</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| E Stormwater <input type="checkbox"/> Project disturbs an area greater than or equal to 1 acre – Erosion Control Permit Required. Attach completed permit application. <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. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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.) <u>Remodeling Kitchen + Adding Deck over</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| G Signature of Tenant and Signature of Owner | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="4" style="text-align: center; padding: 5px;">Office Use Only</th> </tr> <tr> <td style="padding: 2px;">Fees:</td> <td style="padding: 2px;">Type</td> <td style="padding: 2px;">Amount</td> <td style="padding: 2px;">Date Pd</td> </tr> <tr> <td style="padding: 2px;">Permit</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">\$ <u>67.50</u></td> <td style="padding: 2px;"><u>10/21/13</u></td> </tr> <tr> <td style="padding: 2px;">Recreation</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">\$ _____</td> <td style="padding: 2px;"><u>1/1</u></td> </tr> <tr> <td style="padding: 2px;">Recording</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">\$ <u>10.00</u></td> <td style="padding: 2px;"><u>10/21/13</u></td> </tr> <tr> <td style="padding: 2px;">Certificate of Occ</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">\$ _____</td> <td style="padding: 2px;"><u>1/1</u></td> </tr> <tr> <td style="padding: 2px;">Other</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">\$ _____</td> <td style="padding: 2px;"><u>1/1</u></td> </tr> <tr> <th colspan="4" style="text-align: center; padding: 5px;">Building Permit</th> </tr> <tr> <td style="padding: 2px;">Approved <input checked="" type="checkbox"/></td> <td style="padding: 2px;">Rejected <input type="checkbox"/></td> <td colspan="2" style="padding: 2px;">Date: <u>10/21/13</u></td> </tr> <tr> <td colspan="4" style="padding: 2px;">Issued to: <u>Dominic + Amanda Cloud</u></td> </tr> <tr> <td colspan="4" style="padding: 2px;">Zoning Administrator: <u>Theron A. Kelley</u></td> </tr> <tr> <td colspan="4" style="padding: 2px;">Notes: <u>Enquiry made over phone</u></td> </tr> <tr> <td colspan="4" style="padding: 2px;"><u>informed to keep site</u></td> </tr> <tr> <td colspan="4" style="padding: 2px;"><u>John Scott Design</u></td> </tr> <tr> <td colspan="2" style="padding: 2px;">C.O. Required</td> <td style="padding: 2px;">Yes <input type="checkbox"/></td> <td style="padding: 2px;">No <input checked="" type="checkbox"/></td> </tr> </table> | Office Use Only | | | | Fees: | Type | Amount | Date Pd | Permit | | \$ <u>67.50</u> | <u>10/21/13</u> | Recreation | | \$ _____ | <u>1/1</u> | Recording | | \$ <u>10.00</u> | <u>10/21/13</u> | Certificate of Occ | | \$ _____ | <u>1/1</u> | Other | | \$ _____ | <u>1/1</u> | Building Permit | | | | Approved <input checked="" type="checkbox"/> | Rejected <input type="checkbox"/> | Date: <u>10/21/13</u> | | Issued to: <u>Dominic + Amanda Cloud</u> | | | | Zoning Administrator: <u>Theron A. Kelley</u> | | | | Notes: <u>Enquiry made over phone</u> | | | | <u>informed to keep site</u> | | | | <u>John Scott Design</u> | | | | C.O. Required | | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Office Use Only | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fees: | Type | Amount | Date Pd | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Permit | | \$ <u>67.50</u> | <u>10/21/13</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Recreation | | \$ _____ | <u>1/1</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Recording | | \$ <u>10.00</u> | <u>10/21/13</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Certificate of Occ | | \$ _____ | <u>1/1</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other | | \$ _____ | <u>1/1</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Building Permit | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Approved <input checked="" type="checkbox"/> | Rejected <input type="checkbox"/> | Date: <u>10/21/13</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Issued to: <u>Dominic + Amanda Cloud</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Zoning Administrator: <u>Theron A. Kelley</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Notes: <u>Enquiry made over phone</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>informed to keep site</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u>John Scott Design</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| C.O. Required | | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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

(web) 11/02/10

F Diagram – Provide diagram here and include all setbacks

