

Appeal Period Expires 10/12/12
 Zoning District B1

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

Application Date
 Permit Number 2012-189

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: [Signature]

A

Parcel Account Numb. (Map-Parcel-Lot) 2- 047-005-304
 (found in Town Assessor's Office)
 Property Address 42 SUSIE WILSON ROAD Suite #304
 Owner: The Wilsons Inc
 Owner Address: Roger Villemaine 10 Fellowship Rd Suite 351
 Owner Phone: (work) 802 878 3060 (home) SAME
 (cell) 802 578 263 (Email) _____
 Contractors name: S.D. IRELAND Phone: 802 863 6222
 Cell: _____
 Estimated Construction Dates: Start: 10/1/2012 Completion: 10/1/2013
 Sq. Feet 62000 Estimated Cost (labor & materials): \$5,100,000

G

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

Residential:	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 <u>Balcony + parking</u>	<input checked="" 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"/>
Inclusions or Additions: <u>underground</u>			
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"/>
Non-residential:			
Commercial / Industrial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stormwater:			
Stormwater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Erosion Control <u>SEE PLAN</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:			
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). see paid # 2012-160
 Public Private Connection Fee \$ _____ Date Paid: 1/1
 Proposed New Bedrooms 1 Existing Bedrooms _____

C

Water (Please attach Water Service Application).
 Public Private Fee \$ _____ Date Paid: 1/1

D

Driveway (Please attach copy of approved Curbcut / Utility Application).
 Date of approval 1/1 SEE PLAN

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 PLAN) TO BE CONSTRUCTED PURSUANT TO PLANNING COMMISSION APPROVAL DATED 7/31/12 # PC: 2007-12 + 2006-23

Office Use Only

Fees	Type	Amount	Date Pd
Permit		\$	<u>pd w/ print</u>
Recreation		\$	
Recording		\$	
Certificate of Occ		\$	<u># 2012-160</u>
Other		\$	

Building Permit
 Approved Rejected Date 9/29/12
 Issued to: The Wilsons Inc
 Zoning Administrator: Sharon Kelly
 Notes: _____
 C.O. Required Yes No

G

Signature of Tenant and Signature of Owner: [Signature]

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

(web) 11/02/10