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|---|--|---|
| Appeal Period Expires <u>7/14/12</u> Zoning District <u>MXD-PUD(B)</u> | Town of Essex, Vermont Application for Zoning Permit www.essex.org | Application Date Permit Number <u>2012-108</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) 2-093001-000
 (found in Town Assessor's Office)
 Property Address: 70 Essex Way
Essex Inn Partners LTD
 Owner: The Essex Resort + Spa
 Owner Address: 70 Essex Way
 Owner Phone: (work) 878-1100 (home) _____
 (cell) 508-944-2260 (Email) _____
 Contractors name: Essex Resort Phone: 878-1100
(PAT Morgan) Cell: 508-944-2260
 Estimated Construction Dates: Start: 6/18/12 Completion: 6/22/12
 Sq. Feet 260 SF Estimated Cost (labor & materials): \$ 8600.-

B Sewage Disposal (Please attach Sewer or Septic Application). N/A
 Public Private Connection Fee \$ _____ Date Paid: 1/1
 Proposed New Bedrooms: _____ Existing Bedrooms _____

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

D Driveway (Please attach copy of approved Curbcut / Utility Application).
 Date of approval 1/1 Existing N/A

E Stormwater N/A
 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)
Convert Gift shop into a shower kitchen/prep/class area.
7 tile rooms off LOBBY have been opened up to accommodate sitting areas.

G Signature of Tenant and Signature of Owner [Signature]

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 checked="" 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"/> |

Office Use Only

| Fees: | Type | Amount | Date Pd |
|--------------------|------|----------------|----------------|
| Permit | | \$ <u>100</u> | <u>1/1</u> |
| Recreation | | \$ _____ | <u>6/19/12</u> |
| Recording | | \$ <u>20.-</u> | <u>1/1</u> |
| Certificate of Occ | | \$ <u>75</u> | <u>1/1</u> |
| Other | | \$ _____ | <u>1/1</u> |

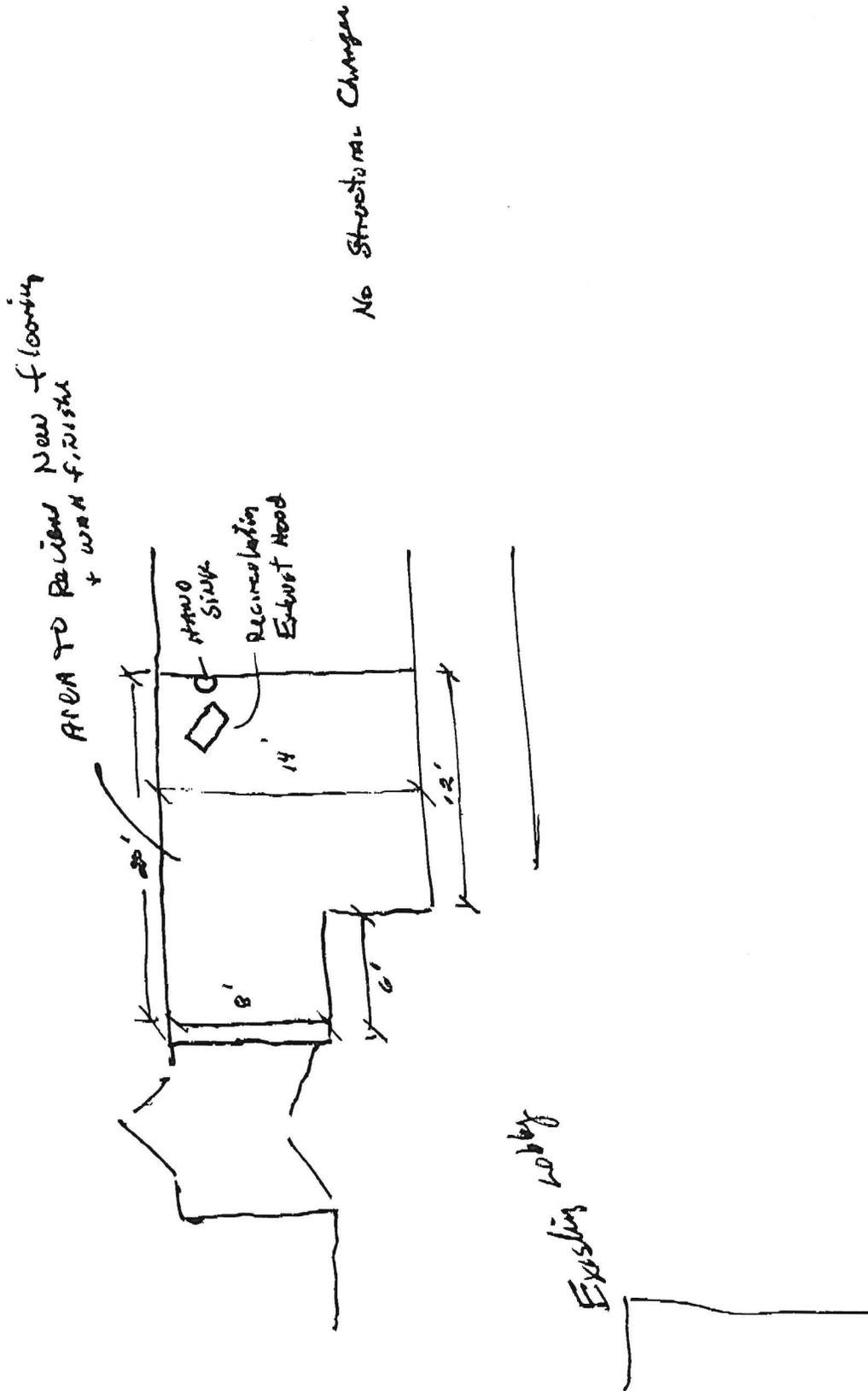
Building Permit

Approved Rejected Date 6/19/12
 Issued to: Essex Inn Partners LTD
 Zoning Administrator: Thomas J. Kelley
 Notes: _____

C.O. Required Yes No

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

F Diagram - Provide diagram here and include all setbacks



Sharon Kelley

From: Arnd Sievers <arnds@VtCulinaryResort.Com>
Sent: Monday, June 25, 2012 11:21 AM
To: Sharon Kelley
Subject: RE: Inn Gift Shop

Good morning Sharon,

We will be using the former gift shop as a demo kitchen and serving welcome receptions for our guest and we also will sell some cooking utensils

The demos will be sushi rolling, crepes making or plate decorating classes for up to 12 persons.

Please let me know if you need anything else from me about this space, as soon we are ready to go I will call Sherry the health inspector to come and do a inspection!

Chef Arnd

From: Sharon Kelley [mailto:skelley@ESSEX.ORG]
Sent: Friday, June 22, 2012 8:24 AM
To: Arnd Sievers
Cc: Jim Glanville; Sharon Kelley
Subject: Inn Gift Shop

Hi Arnd,

Please email me a brief description of how you plan to use the former gift shop area. Also, I am waiting on a copy of the State C.O. If you can get this to me today, I would appreciate it!

SK

*Sharon L. Kelley, Zoning Administrator
Town of Essex
81 Main Street, Essex Jct., VT 05452
(w) (802) 878-1343
(f) (802) 878-1353*