

Appeal Period Expires 10/11/11  
 Zoning District R2

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

Application Date 9/26/11  
 Permit Number 2011-145

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- 008-010-013  
 (found in Town Assessor's Office)  
 Property Address: 2 Whitcomb Meadows Lane  
 Owner: Alan Coe, Kim Coe  
 Owner Address: 2 Whitcomb Meadows Lane  
 Owner Phone: (work) \_\_\_\_\_ (home) 878 3984  
 (cell) 316 1380 (Email) \_\_\_\_\_  
 Contractors name: Alan Coe Phone: 878 3984  
 ? Cell: 316 1380  
 Estimated Construction Dates: Start: 10/1/11 Completion: 12/30/11  
 Sq. Feet: 672 Estimated Cost (labor & materials): \$20,000

**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	<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 checked="" 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 \_\_\_\_\_

**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/

**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.)  
2 Story garage with storage on 2nd story

**G** Signature of Tenant and Signature of Owner Alan Coe

**Office Use Only**

Fees	Type	Amount	Date Pd
Permit		\$ <u>50</u>	<u>9/26/11</u>
Recreation		\$ _____	
Recording		\$ <u>10</u>	<u>9/26/11</u>
Certificate of Occ.		\$ _____	
Other		\$ _____	

Building Permit Approved  Rejected  Date 9/26/11  
 Issued to Alan + Kim Coe  
 Zoning Administrator Sharon L. Kelley  
 Notes: Provision correct  
Amphlet given

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

