Appeal Period Expires 4/28/11 Zoning District _____	**Town of Essex, Vermont** **Application for Zoning Permit** www.essex.org	Application Date 4/1 Permit Number 2011-25

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) 2-012-004-003
(found in Town Assessor's Office)

Property Address: 274 West Sleepy Hollow Rd

Owner: Robert + Michelle Coburn

Owner Address: _____

Owner Phone: (work) _____ (home) _____

(cell) 802-318-8885 (Email) _____

Contractors name: Self Phone: _____

Cell: _____

Estimated Construction Dates: Start: 4/29/11 Completion: 4/29/12

Sq. Feet: 1,000 Estimated Cost (labor & materials): $ 8,000

B

Sewage Disposal (Please attach Sewer or Septic Application).

Public ☐ Private ☒ Connection Fee $_____ Date Paid: __/__/__

Proposed New Bedrooms: 2 Existing Bedrooms ____

C

Water (Please attach Water Service Application).

Public ☐ Private ☒ Fee $_____ Date Paid: __/__/__

D

Driveway (Please attach copy of approved Curbcut / Utility Application).

Date of approval __/__/__ Existing

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 ½ 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.)

finish basement off to Accomodate a Recreation Room, tv Room + dance room for home.

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

	N	A	R
Residential:			
Single Family Basement	☐	☐	☒
Two-family (duplex)(other)	☐	☐	☐
Multi-family	☐	☐	☐
Condominium / Townhouse	☐	☐	☐
Mobile home	☐	☐	☐
Inclusions or Additions:			
Garage (attached) (detached)	☐	☐	☐
Porch (enclosed) (open)	☐	☐	☐
Deck	☐	☐	☐
Pool (in) (above) ground	☐	☐	☐
Shed	☐	☐	☐
Barn (residential) (agriculture)	☐	☐	☐
Non-residential:			
Commercial / Industrial	☐	☐	☐
Stormwater:			
Stormwater	☐	☐	☐
Erosion Control	☐	☐	☐
Other:			
Change in use	☐	☐	☐
Miscellaneous	☐	☐	☐
Renewal	☐	☐	☐

Office Use Only

Fees: Type	Amount	Date Pd	
Permit	$ 50	4/12/11	BK
Recreation	$	__/__/__	
Recording	$ 10	4/12/11	BK
Certificate of Occ	$	__/__/__	
Other	$	__/__/__	

Building Permit

Approved ☒ Rejected ☐ Date 4/13/11

Issued to: R + M Coburn

Zoning Administrator: [signature]

Notes: _____

C.O. Required: Yes ☐ No ☒

(web) 11/02/10

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