

Appeal Period Expires <u>11/11/11</u>	Town of Essex, Vermont	Application Date <u>1/1</u>
Zoning District <u>BDC + MXD-pud</u>	Application for Zoning Permit www.essex.org	Permit Number <u>2011-171</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: Debra Ehler Holland

A Parcel Account Numb. (Map-Parcel-Lot) 2-006-022-000
(found in Town Assessor's Office)

Property Address: 70 Upper Main St. (aka 74 Upper Main St.)

Owner: Ehlerville LLC

Owner Address: 157 River Rd.

Owner Phone: (work) _____ (home) 878-4499
(cell) 598-6435 (Email) djeh12@yahoo.com

Contractors name: Tenant Phone: _____ Cell: _____

Estimated Construction Dates: Start 1/1/11 Completion: 1/1

Sq. Feet: 3570 Estimated Cost (labor & materials): \$1800

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 checked="" 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:			
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:			
Change in use <u>perm A</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 Existing

C Water (Please attach Water Service Application).

Public Private Fee \$ _____ Date Paid: 1/1

Existing

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

Date of approval 1/1 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.)

OVER

G Signature of Tenant and Signature of Owner

Ant P. Ho
Debra Ehler Holland

Office Use Only

Fees	Type	Amount	Date Pd
Permit		\$ <u>25</u>	<u>1/1/11</u>
Recreation		\$ _____	<u>1/1</u>
Recording		\$ <u>10</u>	<u>1/1/11</u>
Certificate of Occ		\$ _____	<u>1/1</u>
Other		\$ _____	<u>1/1</u>

Building Permit

Approved Rejected Date 1/1/11

Issued to: Ehlerville LLC

Zoning Administrator: Sharon Kelly

Notes: OVER

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

- Applicant to resurrect the auto repair shop business that moved out within the last year.
- Applicant to operate under same umbrella that was granted to previous occupant.
- No motor vehicle sales are connected with this permit. This includes no display of any motor vehicle(s).
- IF Applicant desires an increase to business, proper reviews shall be obtained prior to any expansion.
- This officer reserves the right to more clearly define the operation if it is required in the future as the business proceeds.
- C.O. is not necessary at this time as applicant is to use exact area/space for his business. NO improvements done.

Sharon Kelley, Z.A.