

Appeal Period Expires <u>9/2/11</u>	Town of Essex, Vermont	Application Date <u>8/18/11</u>
Zoning District <u>R2</u>	<b>Application for Zoning Permit</b>	Permit Number <u>2011-126</u>
	www.essex.org	

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: Chris Peden

**A** Parcel Account Numb. (Map-Parcel-Lot) 2-054-041-000  
(found in Town Assessor's Office)  
Property Address: 45 Pioneer St.  
Owner: Christina A. Peden  
Owner Address: same  
Owner Phone: (work) 862-2828 (home) 878-6968  
(cell) 233-0189 (Email) CHRIS@B2000  
Contractors name: B.C. Parrier Phone: 878-8805  
Cell: \_\_\_\_\_  
Estimated Construction Dates: Start: 8/29 Completion: 9/29  
Sq. Feet: \_\_\_\_\_ Estimated Cost (labor & materials): \$300-500

**G**

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

<b>Residential:</b>	N	A	R
Single Family	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
<b>Inclusions or Additions:</b>			
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"/>
<b>Non-residential:</b>			
Commercial / Industrial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Stormwater:</b>			
Stormwater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Erosion Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Other:</b>			
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 3 (130-5-2000 permit #T)

**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.)

Small bathroom off family room of revised ranch lower level. make closet in back bedroom into washer/dryer area

**G** Signature of Tenant and Signature of Owner Chris Peden

**Office-Use Only**

Fees:	Type	Amount	Date Pd
Permit		\$ <u>50</u>	<u>8/18/11</u>
Recreation		\$ _____	<u>1/1</u>
Recording		\$ <u>10</u>	<u>8/18/11</u>
Certificate of Occ		\$ _____	<u>1/1</u>
Other		\$ _____	<u>1/1</u>

Building Permit Approved  Rejected  Date 8/19/11  
Issued to: Christina A. Peden  
Zoning Administrator: Shawn 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

