

Appeal Period Expires <u>9/8/11</u>	Town of Essex, Vermont	Application Date <u>1/1</u>
Zoning District <u>A2</u>	Application for Zoning Permit	Permit Number <u>2011-128</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: K. Gehsmann

A

Parcel Account Numb. (Map-Parcel-Lot) 2-101-003-059
(found in Town Assessor's Office)

Property Address: 4 Debra Dr.

Owner: Karl Gehsmann (Kristin)

Owner Address: 4 Debra Drive

Owner Phone: (work) 654-2412 (home) 872-9934
 (cell) 578-9245 (Email) _____

Contractors name: n/a Phone: _____ Cell: _____

Estimated Construction Dates: Start: 3/1/1999 Completion: 12/1/1999

Sq. Feet: 950 Estimated Cost (labor & materials): \$1,000

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 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"/>
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	<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: 0 Existing Bedrooms 4

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 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.)

Finish portion of basement (ATF) area used as a private office (no business in house)

G

Signature of Tenant and Signature of Owner Kristin Gehsmann

Office Use Only

Fees:	Type	Amount	Date Paid
Permit		<u>\$50-</u>	<u>8/23/11</u>
Recreation		\$ _____	<u>1/1</u>
Recording		<u>\$10-</u>	<u>8/23/11</u>
Certificate of Occ.		\$ _____	<u>1/1</u>
Other		\$ _____	<u>1/1</u>

Building Permit

Approved Rejected Date 8/24/11

Issued to Karl Kristin Gehsmann

Zoning Administrator Shawn L. Selig

Notes: Original permit for house

155-1778

C.O. Required Yes No

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

(web) 11/02/10

F Diagram – Provide diagram here and include all setbacks

