

Appeal Period Expires <u>7/14/10</u>	Town of Essex, Vermont Application for Zoning Permit www.essex.org	Application Date <u>1/1</u>
Zoning District <u>RPO-7</u>		Permit Number <u>201046</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 and it must remain posted throughout the construction period.

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.

Occupancy of the premises shall not take place until a Certificate of Occupancy is obtained.

Approval is subject to accuracy of information provided by the applicant.

A

Parcel Account Num. (Map-Parcel-Lot) 2- 072-004-003
(found in Town Assessor's Office)

Property Address: 3 Oliver Wight Dr. Green Mts

Owner: 3 Oliver Wight Dr. LLC. Jo Jennifer Catella

Owner Address: 8 Jones Ave Essex Vt

Owner Phone: (work) 879-9955 (home) _____
 (cell) 373-0389 (Email) _____

Contractors name: Scott Catella Phone: 316-9310
 Cell: 373-0389

Estimated Construction Dates: Start: 9/15/10 Completion: 12/15/10

Sq. Feet: 6,375 +/- Estimated Cost (labor & materials): \$11,000

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). due at C.O.

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.)

*To operate pursuant to Planning Commission Approved # 2010-
 X Patricia K Kelly, CEO Green and Water Mgmt
 3 Oliver Wight Dr LLC*

G

Signature of Owner Jo Jennifer Catella

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"/>
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 checked="" type="checkbox"/>
Miscellaneous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Renewal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*+ use
Fit-up for DAY CARE*

Office Use Only

Fees:	Type	Amount	Date Pd
	Permit	\$ <u>100</u>	<u>9/21/10</u>
	School	\$ _____	<u>1/1</u>
	Recreation	\$ _____	<u>1/1</u>
	Recording	\$ <u>20</u>	<u>9/21/10</u>
	CO Other	\$ <u>75</u>	<u>9/21/10</u>

Building Permit
 Approved Rejected Date: 9/21/10

Issued to: Girls Scouts of the Green

Zoning Administrator: Patricia Kelly

Notes: * Additional fees due at time of C.O.

G.O. Required Yes No

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

** see PC Approval for C.O. conditions.*