

Appeal Period Expires 3/10/10
 Zoning District B1

Town of Essex, Vermont
Application for Zoning Permit
 www.essex.org

Application Date 1/1
 Permit Number 2010-14

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) 2-047-012-822
 (found in Town Assessor's Office)
 Property Address: one marketpk, ej vt site 2B
 Owner: Ann M. Herko dba Essex Hair Designers
 Owner Address: 43 Dairy Drive, EJ. VT
 Owner Phone: (work) 879-0306 (home) 878-5828
 (cell) 310-0187 (Email) annah@essexhair.com
 Contractors name: Jim Durett Phone: 879-6792
 Cell: 922-3024
 Estimated Construction Dates: Start: 6/1/10 Completion: 7/1/10
 Sq. Feet: 925 Estimated Cost (labor & materials): \$2,000-

B Sewage Disposal (Please attach Sewer or Septic Application): existing
 Public Private Connection Fee \$ _____ Date Paid: 1/10
 Proposed New Bedrooms: _____ Existing Bedrooms _____

C Water (Please attach Water Service Application). existing
 Public Private Fee \$ _____ Date Paid: 1/1

D Driveway (Please attach copy of approved Curbcut / Utility Application).
 Date of approval 1/1 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 1/2 acre - Erosion Control Permit and Stormwater Management Permit required. Attach completed permit application. N/A

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.)
Moving into unit 2B from unit 1H
downsizing floor space only.
6 chairs, Mon-Sat. 8am-7pm
Adding 1/2 wall for screening sinks

G Signature of Owner Ann M. Herko dba Essex Hair

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 <u>Permit at construction</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"/> |

Office Use Only

| Fees: | Type | Amount | Date Pd |
|-------|------------|----------------|----------------|
| | Permit | \$ <u>100-</u> | <u>2/23/10</u> |
| | School | \$ _____ | <u>1/1</u> |
| | Recreation | \$ _____ | <u>1/1</u> |
| | Recording | \$ <u>20-</u> | <u>2/12/10</u> |
| | CO Other | \$ <u>25</u> | <u>2/12/10</u> |

Building Permit Approved Rejected Date 2/23/10
 Issued to: Ann M. Herko & DANIS
 Zoning Administrator: Theresa Kelley
 Notes: _____
 C.O. Required Yes No

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

(web) 01/25/06

* LANDOWNER
 DANIS, JAY

Designers

JAY