Appeal Period Expires 11/10/10
Zoning District AR

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

Application Date 10/25/10
Permit Number 2010-156

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 Numb. (Map-Parcel-Lot) 2- 015-008-013
(found in Town Assessor's Office)
Property Address : 301 Browns River Road
Owner: David + Sharon Clow
Owner Address: 305 Browns River Rd Essex
Owner Phone: (work) 355-5507 (home) 8787639
(cell) 355-5507 (Email) _____
Contractors name: S+D Inc Phone: 355-5507
Cell: _____
Estimated Construction Dates: Start: 10/30/10 Completion: 2/27/11
Sq. Feet: 1000 Estimated Cost (labor & materials): $ 20,000

B

Sewage Disposal (Please attach Sewer or Septic Application).
Public ☐ Private ☒ Connection Fee $_____ Date Paid: __/__/__
Proposed New Bedrooms: 0 Existing Bedrooms 0

C

Water (Please attach Water Service Application).
Public ☐ Private ☒ Fee $_____ Date Paid: __/__/__

D

Driveway (Please attach copy of approved Curbcut / Utility Application).
Date of approval __/__/__

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 ½ 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.)

See Diagram OVER

G

Signature of Owner David E Clow

G

Check box(es) which describe proposed use or construction (circle choice in parenthesis).

N = New A = Addition R = Remodel

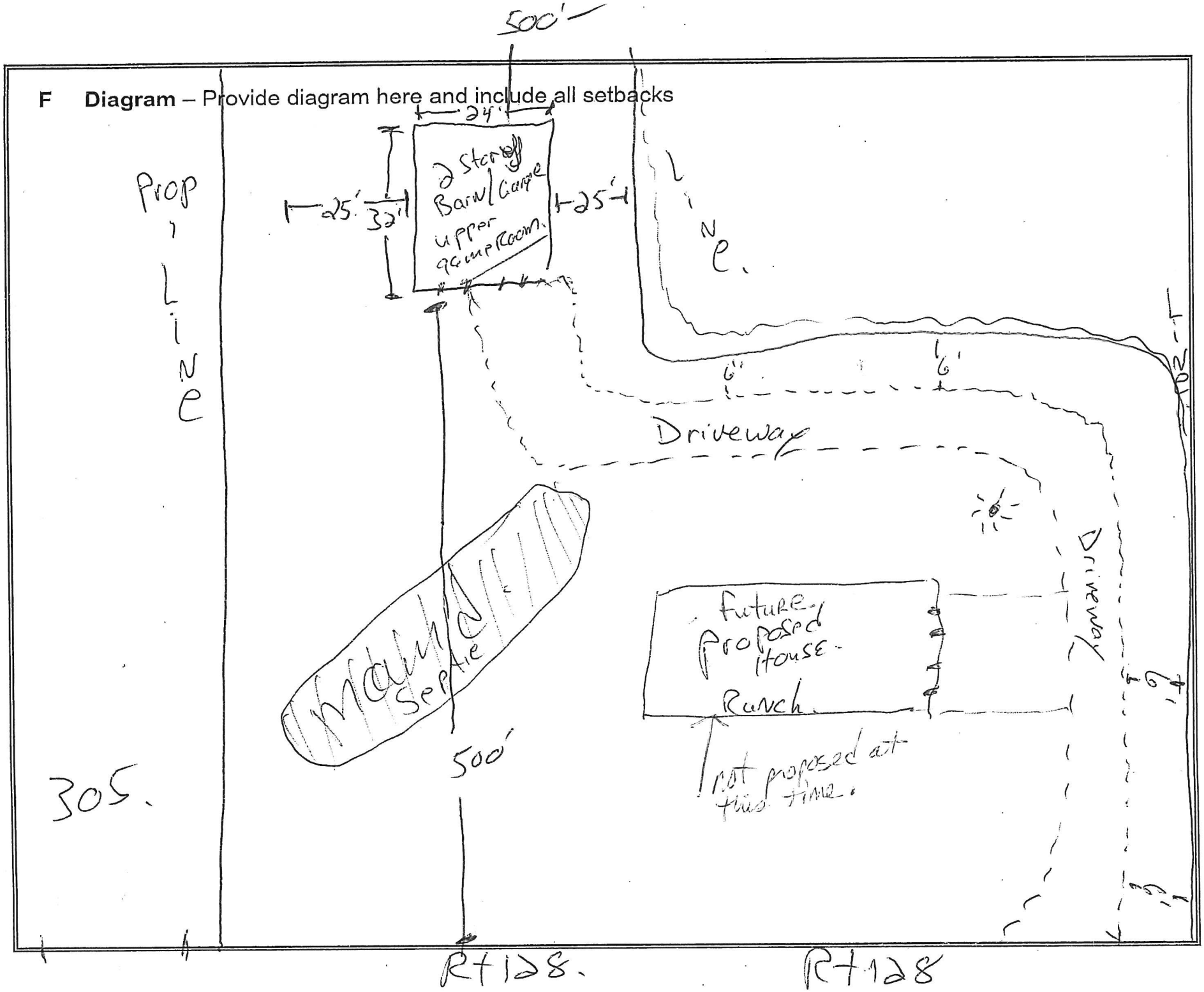
	N	A	R
Residential:			
Single Family	☐	☐	☐
Two-family (duplex)(other)	☐	☐	☐
Multi-family	☐	☐	☐
Condominium / Townhouse	☐	☐	☐
Mobile home	☐	☐	☐
Inclusions or Additions: 2 story			
Garage (attached) (detached)	☒	☐	☐
Porch (enclosed) (open)	☐	☐	☐
Deck	☐	☐	☐
Pool (in) (above) ground	☐	☐	☐
Shed	☐	☐	☐
Barn (residential) (agriculture)	☐	☐	☐
Non-residential:			
Commercial / Industrial	☐	☐	☐
Stormwater:			
Stormwater	☐	☐	☐
Erosion Control	☐	☐	☐
Other:			
Change in use	☐	☐	☐
Miscellaneous	☐	☐	☐
Renewal	☐	☐	☐

Office Use Only

Fees: Type	Amount	Date Pd
Permit	$ 50.00	10/26/10
School	$	/ /
Recreation	$	/ /
Recording	$ 10.00	10/26/10
Other	$	/ /

Building Permit
Approved ☒ Rejected ☐ Date 10/26/10
Issued to: Clow, David & Sharon A.
Zoning Administrator: [illegible]
Notes: Conditions to be contacted prior to the construction of the house. See [illegible] dated 10/27/07 for subsequent approval
C.O. Required Yes ☐ No ☒

(web) 01/25/06

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

F **Diagram** – Provide diagram here and include all setbacks