Appeal Period Expires 06/05/09
Zoning District R2

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

Application Date 05/21/09
Permit Number 2009-57

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- 062-003-011
(found in Town Assessor's Office)

Property Address : 49 Greenfield Road (Lafferty)

Owner: Dominic Cloud, Amanda Cloud

Owner Address: Same as Property

Owner Phone: (work) 802 660-2555 (home) 802 876-7086

(cell) 8025228318 (Email) _____

Contractors name: S. Polli Phone: _____

Cell: _____

Estimated Construction Dates: Start: asap / / Completion: 2-3 weeks later / /

Sq. Feet: _____ Estimated Cost (labor & materials): $ 14,500

**B**

**Sewage** Disposal (Please attach Sewer or Septic Application).

Public ☐ Private ☐ Connection Fee $_____ Date Paid: ___/___/___

Proposed New Bedrooms: 2 Existing Bedrooms ____

**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.)

Remodelling Kitchen + Dining Room One Big Room. Living Room + Den Removing Walls.

**G**

Signature of Owner Amanda Cloud

**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:* | | | |
| 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 | 05/21/09 |
| School | $ | / / |
| Recreation | $ | / / |
| Recording | $ 8.00 | 05/21/09 |
| Other | $ | / / |

**Building Permit**

Approved ☒ Rejected ☐ Date 5/21/09

Issued to: Dominic Cloud + Amanda Lafferty

Zoning Administrator: Shum L. Kelley

Notes: _____

C.O. Required Yes ☐ No ☒

(web) 01/25/06

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