

40.00 PAID 4/7/98
slg 002

TOWN OF ESSEX CERTIFICATE OF OCCUPANCY APPLICATION

MAP/PARCEL/LOT: 2-058-029-000

NO. 155-83

The undersigned herewith requests an inspection of the premises and the issuance of "Certificate of Occupancy" of premises, or portion thereof, for use or habitation.

- This request is for use only of existing land or buildings.
- This request is for new construction or rehabilitated or altered structure which was done under authority of zoning permit # 155-83

issued November 29, 1983 to Cleland E. + Suzanne C. Selby

Premises are at 3-A Brown's River Road

Water service installation inspected and approved by NA

Driveway location inspected and approved by NA

Sanitary sewer connection or septic system inspected and approved by:

Name: NA Date: _____

Construction was begun 11/29, 1983 and completed 11/1, 1984

Approval granted by _____ P.C. or Z.B.A. on _____, 19____.

Use of premises intended Residential Alteration
(type of use)

Applicant's Signature: Cindy Delibac Telephone: (w) 878-8187
(H) 879-3119

By issuance of this Occupancy Permit, the Town of Essex Zoning Administrator hereby acknowledges that the use and/or building construction is in complete conformity with the Zoning Regulations, unless otherwise noted. Field measurements and similar dimensions for setbacks are based in part on evidence supplied by owner. The Town of Essex is not liable for errors or mistakes when it is found that information submitted by the applicant is erroneous or inaccurate.

Certificate of Occupancy has been approved with _____ without conditions. If with conditions, see attachment outlining same.

Certificate of Occupancy denied _____. Please see attachment with reasons for denial.

4/8/98
Date

Jerry L. Firkey
Jerry L. Firkey, Zoning Administrator

The undersigned hereby applies for permission to make certain improvements as described below (Plans to be submitted if required by Zoning Administrator.) All construction to be completed in accordance with Zoning Laws and Building Regulations of the Town of Essex and the State of Vermont, and conform to the National Board of Fire Underwriters Regulations and any and all Federal Regulations now in effect.

A PROPERTY ADDRESS 3A BROWNS RIVER RD. OWNER NAME CLELANDE + SUZANNE C. SELBY
 OWNER ADDRESS SAME PHONE NUMBER - WORK _____ HOME 878-4530
 TOWN TAX MAP _____ PARCEL _____ PLAN FILED LAND RECORDS BOOK _____ PAGE _____ ESTIMATED COST \$10,000

B SEWAGE DISPOSAL PUBLIC CONNECTION FEE _____ DATE PAID _____
 PRIVATE PLAN ATTACHED APPROVED REJECTED
 BY N/A DATE _____
 ON SITE INSPECTION BY _____ DATE _____
 AS BUILT SUBMITTED NO. OF BEDROOMS _____

C WATER PUBLIC FEE N/A DATE PAID _____
 NO. OF METERS _____ REQUEST DATE _____
 PRIVATE APPROVED BY _____

D HIGHWAY R.O.W. SEWER WATER POWER TEL GAS TV POLE PERMIT
 APPROVED BY N/A DATE _____

E DRIVE CURB CUT APPROVED BY N/A DATE _____
 CULVERT REQUIRED TYPE _____ NOT REQUIRED

F OCCUPANCY CERTIFICATE CONSTRUCTION BEGUN: _____ ACTUAL COST _____
 COMPLETED: _____
 CERTIFICATE APPROVED DENIED Reasons for denial are given in writing according to Law, a copy of which is appended hereto.
 ZONING ADMINISTRATOR _____
 DATE _____

H Check box(es) best describing proposed use or construction.

	Total New	Addition	Alteration
SINGLE FAMILY	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
NO. FAMILY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RETAIL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OFFICE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INDUSTRIAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GARAGE (ATT.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(DET.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PORCH (OPEN)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(SCREENED)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(ENCLOSED)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(DECK)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
POOL (INGROUND)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(ABOVE GROUND)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SHED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BARN (AGRICULTURAL)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(RESIDENTIAL)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MOBILE HOME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VACATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CONDOMINIUM <small>NO UNITS</small>	<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"/>

G Replace exterior doors and windows
 Add one full bath
 Partitions to divide one existing large bedroom into 2 bedrooms
 Closet in one bedroom
 Replace or add one ladder in kitchen
 Replace kitchen floor
 Various electrical & plumbing changes
 Have replaced one chimney and hearth for wood stove

2-058-029-000

I SIGNATURE OF OWNER
Suzanne C. Selby

J FOR OFFICE USE ONLY
 FEE PAID \$70.00 pd
 APPROVED REJECTED
 ISSUED TO C. S. Selby
 DATE 11-29-83
Jerry Z. Pinsky
 Zoning Administrator

ZONING BOARD OF ADJUSTMENT
 APPROVED REJECTED
 DATE _____

PLANNING COMMISSION
 APPROVED REJECTED
 DATE _____

THIS PERMIT VALID FOR TWELVE MONTHS ONLY FROM ISSUE
 APPROVAL IS SUBJECT TO THE ACCURACY OF INFORMATION GIVEN BY APPLICANT