

TOWN OF ESSEX CERTIFICATE OF OCCUPANCY APPLICATION

DATE OF REQUEST: _____ FEE: \$115.00 PC (includes recording)

MAP/PARCEL/LOT: 2/05-014-020 NO. 2021-35

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 # 2021-35

issued to SRA Associates, LLC (Tom Chase) on 3-15-2021

Premises are at 140 Chase Ct

Water service installation inspected and approved by PW

Driveway location inspected and approved by PW

Sanitary sewer connection or septic system inspected and approved by:

Name: _____ Date: PW

Construction was begun April, 2021 and completed June, 2022

Approval granted by P.C. or Z.B.A. on ~~5-15~~, 2021. *reference PC Approval # 2017-27 issued on 7-27-17*

Use of premises intended 4-Bedroom Townhouse, unfinished basement, attached garage, open porch, deck.
(type of use)

Applicant's Signature: Thomas Chase Telephone: _____ Cell 502-316-9537

Email Address: Tchase@reagleychase.com

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.

6-7-2022 Sharon L. Kelly
Date Zoning Administrator