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TOWN OF ESSEX CERTIFICATE OF OCCUPANCY APPLICATION

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

MAP/PARCEL/LOT: 2/014/019/001 NO. 2021-112

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 # 2021-112

issued to Andrew, John + Susan Hood on 6-4-2021

Premises are at 115 Brigham Hill Rd

Water service installation inspected and approved by John Stuart PE see attached

Driveway location inspected and approved by P.W.

Sanitary sewer connection or septic system inspected and approved by:
Name: _____ Date: John Stuart PE see attached

Construction was begun June, 2021 and completed _____, 20____ reference PC approvals

Approval granted by P.C. or Z.B.A. on 2017+2019, 20____ 2017-40 + 2019-1

Use of premises intended SFH, 4 bedroom, attached garage
(type of use)

Applicant's Signature: Andrew Hood/sex Telephone: _____ Cell: 3161900
Email Address: A.hood.construction@yahoo.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. * siding to go on no later than June 1, 2022.
If with-conditions, see attachment-outlining same.

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

2/8/2022 Sharon L. Kelley
Date _____ Zoning Administrator

Department of Environmental Conservation

Wastewater System & Potable Water Supply

Installation Certification Signature Sheet

Instructions:
 The Submission Number and Version of the online Installation Certification being signed **must** be entered in the field below.

Hand Signatures - This signature sheet can be downloaded, printed, signed by hand, and then scanned and uploaded to the **Signatures** section of the online form.

Digital Signatures - This signature sheet can be signed using the certificate-based digital signature capability available in Adobe Acrobat/Reader (or other PDF software with similar capability) and then uploaded to the **Signatures** section of the online application form. If this sheet contains one or more digital signatures, it **must** be uploaded in a format that does not compromise the ability to click on the applied signature and validate it. The digital signature applied must include the signer's full name, email address, and the date and time of signing. Because the Signature Sheet needs to be submitted in a format that allows the signatures to be validated, a Signature Sheet cannot contain both digital and hand signatures.

Note: If you digitally sign this sheet, please don't enter a date in the Signature Date field. The date and time must be included in the digital signature that is applied as described above.

ANR Online Submission Number & Version

ANR Online Submission Number and Version (for example: #20J-65KQ-R1ZF, version 1)
 HPB-BNN3-4V76T

Permit and Lot Number

Permit Number and Lot Number, if applicable
 WW-4-5564

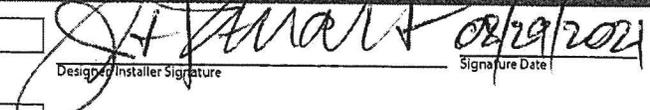
Select the type of installation(s) being certified on this ANR Online Submission:

- | | |
|--|---|
| <input checked="" type="radio"/> Wastewater System | <input checked="" type="radio"/> Water Supply |
| <input type="radio"/> Wastewater System Requiring Record Drawing | <input type="radio"/> Water Supply Requiring Record Drawing |
| <input type="radio"/> No Wastewater System Installation | <input type="radio"/> No Water Supply Installation |
- Insert Certification Language

Check the appropriate installations above and click the 'Insert Certification Language' button to include the appropriate verification text.

I hereby certify that, in the exercise of my reasonable professional judgement, the installation-related information submitted is true and correct and that the potable water supply and wastewater system were installed in accordance with the permitted design and all the permit conditions, were inspected, were properly tested, and have successfully met those performance tests.

Designer(s)/Installer(s) Certification

WW/WS Designer Designer/Installer Role	JH Stuart, P.E. Print Designer/Installer Name	 Designer/Installer Signature	02/19/2021 Signature Date
 Designer/Installer Role	 Print Designer/Installer Name	 Designer/Installer Signature	 Signature Date

Town Record Filing Information

If using this form to provide the Town with certification information for filing in land records, fill out the appropriate/available information below. Other identifiers might include SPAN, Landowner name(s), 911 Address, etc.

Parcel ID	2014019001	Town Clerk may indicate receipt here
Subdivision Name/Lot #	2	
Other Identifier(s)		
Other Identifier(s)		