

TOWN OF ESSEX CERTIFICATE OF OCCUPANCY APPLICATION

DATE OF REQUEST: _____ FEE: \$90.00 pa (includes recording)

MAP/PARCEL/LOT: 2/047-034-008 NO. 2020-181

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 # 2020-181

issued to Gabe Handy on 10-20-20

Premises are at 26 Pioneer St

Water service installation inspected and approved by P. Wake

Driveway location inspected and approved by existing

Sanitary sewer connection or septic system inspected and approved by:

Name: Craig Chase Date: 6-9-2021 see attached

Construction was begun NOV, 20 20 and completed June, 20 21.

Approval granted by _____ P.C. or Z.B.A. on N/A, 20 _____.

Use of premises intended Single Family House, attached garage open porch deck + finished basement.
(type of use)

Applicant's Signature: Gabe Handy Telephone: _____ Cell: 343-3292

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.

6-3-2021
Date

Sharon Kelley
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)

Submission HP8-VH4J-XDBP0 Revision 1 Form Version 1.3

Permit Number

Permit Number

WW-4-5448

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

- | | |
|--|---|
| <input checked="" type="radio"/> Wastewater System | <input 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 checked="" 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 wastewater system was installed in accordance with the permitted design and all the permit conditions, was inspected, was properly tested, and has successfully met those performance tests.

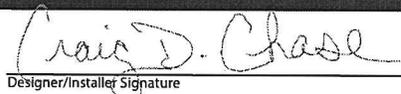
Designer(s)/Installer(s) Certification

WW Designer

Designer/Installer Role

Craig D. Chase

Print Designer/Installer Name



 Designer/Installer Signature

6/9/2021

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 information below.

Parcel ID

2047034000

 and
or

Subdivision Name

Lot Number

 and
or

Other Identifying Information

26 Pioneer Street