

40.00 fee
7.00 recording fee

TOWN OF ESSEX CERTIFICATE OF OCCUPANCY APPLICATION

MAP/PARCEL/LOT: _____

NO. 160-87

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 # 160-87

issued August 20, 1987 to Daniel Damberg

Premises are at 319 River Rd, ESSEX, Vermont

Water service installation inspected and approved by N/A

Driveway location inspected and approved by N/A

Sanitary sewer connection or septic system inspected and approved by:

Name: N/A Date: _____

Construction was begun _____, 1987 and completed _____, 1987

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

Use of premises intended Garage Addition

Applicant's Signature: Daniel J. Damberg Telephone: 878-3346

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.

Date _____ Jerry L. Firkey, Zoning Administrator

TOWN OF ESSEX

APPLICATION FOR CERTIFICATE OF OCCUPANCY

No. 86-80

1

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 building permit # 86-80

issued 7-28 1980 to Daniel Damborg

Premises are at River Rd.

Driveway location inspected and approved by State of Vermont

Water service installation (if necessary) inspected and approved by Private Well

Sanitary sewer connection or septic system inspected and approved 9-4 1980 by R. Knowlton
(Signature)

Construction was begun ? 1980 and completed ? 1981

Actual cost of construction \$?

Use of premises intended House

Land was conveyed by _____ and is recorded in Vol. _____ page _____ of the Town of Essex Land Records grantor to _____ grantee.

Date 3/19/81 Applicant's Signature (forgot to obtain)

Certificate of Occupancy is herewith (approved) (denied) and in the event of denial the reasons therefore are given in writing according to law, a copy of which is appended hereto. Although there are some missing items the new home was inspected and found to be satisfactory ✓

Date 3/19/81 roc
I forgot to have her sign

J. 2 Parks
Zoning Administrator
Town of Essex, Vermont

Damberg, Daniel
319 River Road

160-85

garage 10,000

8-20-87

8-3-1987 AR

APPLICATION FOR ZONING PERMIT

8-30-87 160-8

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 319 RIVER RD OWNER NAME DANIEL DAMBERG
 OWNER ADDRESS 319 RIVER RD PHONE NUMBER - WORK 878-4440 HOME 879-4674
 TOWN TAX MAP 4 PARCELS 3-2 PLAN FILED LAND RECORDS BOOK _____ PAGE _____ ESTIMATED COST \$10,000

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

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

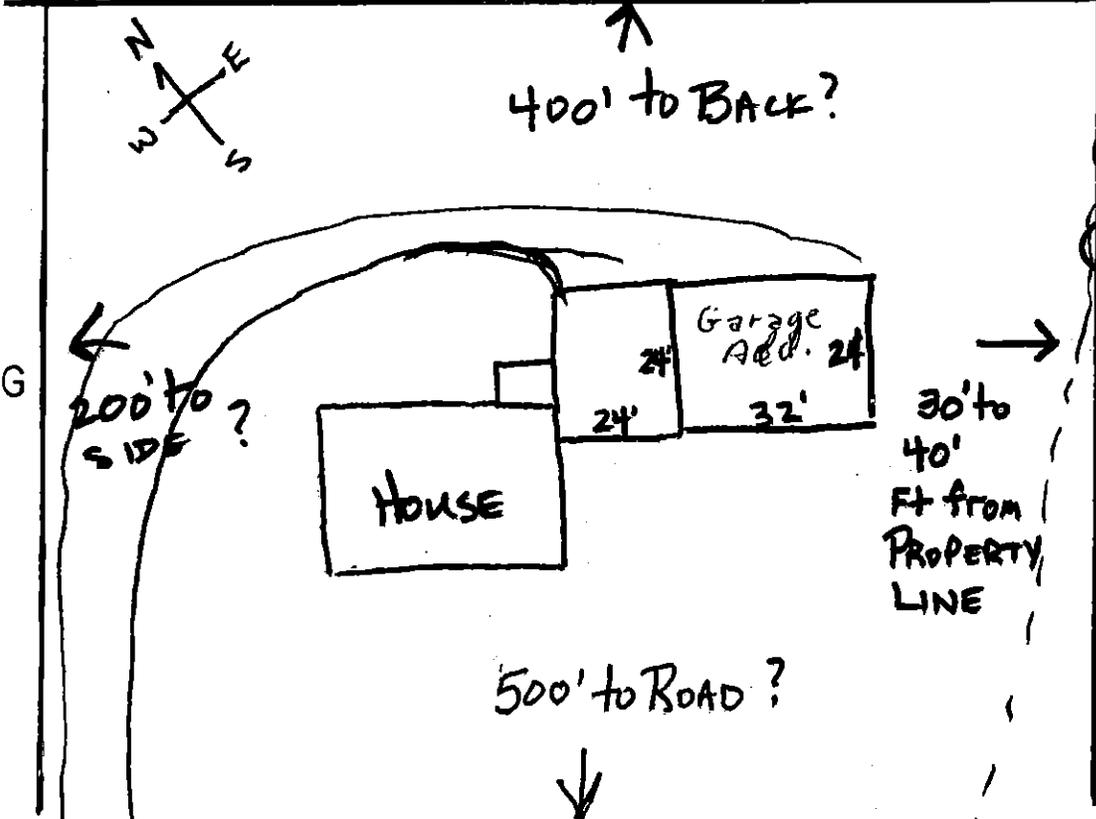
D HIGHWAY R.O.W. SEWER WATER POWER TEL GAS TV POLE PERMIT
 APPROVED BY _____ DATE _____

F DRIVE CURB CUT APPROVED BY _____ DATE _____
 CULVERT REQUIRED X _____ TYPE _____ NOT REQUIRED

T 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	Cons.
	Addition	Alteration
SINGLE FAMILY	1	<input type="checkbox"/>
NO FAMILY	2	<input type="checkbox"/>
RETAIL	3	<input type="checkbox"/>
OFFICE	4	<input type="checkbox"/>
INDUSTRIAL	5	<input type="checkbox"/>
GARAGE (ATT.)	6	<input checked="" type="checkbox"/>
(DET.)	7	<input type="checkbox"/>
PORCH (OPEN)	8	<input type="checkbox"/>
(SCREENED)	9	<input type="checkbox"/>
(ENCLOSED)	10	<input type="checkbox"/>
(DECK)	11	<input type="checkbox"/>
POOL (INGROUND)	12	<input type="checkbox"/>
(ABOVE GROUND)	13	<input type="checkbox"/>
SHED	14	<input type="checkbox"/>
BARN (AGRICULTURAL)	15	<input type="checkbox"/>
(RESIDENTIAL)	16	<input type="checkbox"/>
MOBILE HOME	17	<input type="checkbox"/>
VACATION	18	<input type="checkbox"/>
CONDOMINIUM	19	<input type="checkbox"/>
MISCELLANEOUS	20	<input type="checkbox"/>
RENEWAL	21	<input type="checkbox"/>



I SIGNATURE OF OWNER
Daniel Damberg

J FOR OFFICE USE ONLY
 FEE PAID \$1500
 APPROVED REJECTED
 ISSUED TO P. Damberg
 DATE Aug. 30, 1987
J. J. [Signature]
 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