

TOWN OF ESSEX

APPLICATION FOR CERTIFICATE OF OCCUPANCY

No. 99-87

July 8, 19 92

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/zoning permit # 99-87 issued June 25, 19 87 to Flanders Building Supply, Inc.

(NAME)

Premises are at 34 Chelsea Road, Essex, VT 05451 (Lot #31)

(STREET ADDRESS)

Applicants Mailing Address (If different) 34 Park Street; P.O. Box 74 Essex Jct., VT 05452

Driveway location inspected and approved by R.C. & D. Lutz

Water service installation inspected and approved by R. Safford

Sanitary sewer connection or septic system inspected and approved by:

Carl Crawford

(NAME)

(DATE)

, 19

Construction was begun April 8, 19 92 and completed July 6, 19 92

Actual cost of construction \$ 60,000.00

Approval granted by Planning Commission Zoning Board of Adjustment _____, 19 _____.

Use of premises intended Residential Home
(What will you use the new bldg. addition or alt. for)

Daytime phone # 878-3381, July 8, 19 92
(DATE)

Brene M. Mosher
(Applicant's Signature) for
Flanders Building Supply, Inc.

Certificate of Occupancy approved with without conditions.

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

July 15, 19 92

John R. Pate
Zoning Administrator



TOWN OF ESSEX VERMONT

81 MAIN STREET, ESSEX JUNCTION, VERMONT 05452
Fax: 878-1353 • E-mail: manager@essex.org • Website: www.essex.org

ZONING COMPLIANCE CERTIFICATION

TO WHOM IT MAY CONCERN:

I have checked the Community Development Office files to determine if any zoning violation notice has been issued on the following property:

34 CHELSEA ROAD

owned by: JEROME SPAR, RICHARD E. SPAR & BETTY A. SPAR

There is not any record of a zoning violation notice having been issued at the aforesaid address to the aforesaid person.

There is a record of a zoning violation notice having been issued at the aforesaid address. Said violation was issued on and to _____

Jerry L. Firkey
Zoning Administrator

Date: 4/23/99

YOUR NAME: NORMAN C. SMITH

FAX NUMBER: 879-9640

PERMIT #: 99-87

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TOWN MANAGER	PARKS AND RECREATION	COMMUNITY DEVELOPMENT	PUBLIC WORKS	ASSESSOR	FINANCE	TOWN CLERK	LIBRARY	POLICE
878-1341	878-1342	878-1343	878-1344	878-1345	878-1359	879-0413	879-0313	878-8331