

TOWN OF ESSEX  
APPLICATION FOR CERTIFICATE OF OCCUPANCY

No. \_\_\_\_\_

\_\_\_\_\_ 19 \_\_\_\_\_

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 # 206-87

issued 10-26-87 1987 to Gerald B. Fno  
(NAME)

Premises are at 4 Abare Ave  
(STREET ADDRESS)

Applicants Mailing Address (If different) Essex Jct VT 05452

Driveway location inspected and approved by \_\_\_\_\_

Water service installation inspected and approved by \_\_\_\_\_  
(NAME)

Sanitary sewer connection or septic system inspected and approved by:  
\_\_\_\_\_  
(NAME) \_\_\_\_\_ 19 \_\_\_\_\_  
(DATE)

Construction was begun \_\_\_\_\_ 19 \_\_\_\_\_ and completed \_\_\_\_\_ 19 \_\_\_\_\_

Actual cost of construction \$ \_\_\_\_\_

Approval granted by \_\_\_\_\_ Planning Commission \_\_\_\_\_ Zoning Board of Adjustment  
\_\_\_\_\_ 19 \_\_\_\_\_

Use of premises intended Tool shed, lawn machinery  
(What will you use the new bldg., addition or alt. for)

Daytime phone # 878-5895 . 11-12 1987  
(DATE)

Gerald B. Fno  
(APPLICANT'S SIGNATURE)

Certificate of Occupancy approved \_\_\_\_\_ with \_\_\_\_\_ without \_\_\_\_\_ conditions.

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