

TOWN OF ESSEX

CERTIFICATE OF OCCUPANCY APPLICATION

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

MAP/PARCEL/LOT: 2/074/006/002

NO. 2016-194
+ renewed permits

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. 2014-197
2016-194
2018-238
2020-208
2022-172
- This request is for new construction or rehabilitated or altered structure which was done under authority of zoning permit # 2016-194

issued to Palmer J + Kate E Irish on 11.28.20

Premises are at 173 Lost Nation

Water service installation inspected and approved by private

Driveway location inspected and approved by David J. Gigan 12/16/24

Sanitary sewer connection or septic system inspected and approved by: private

Name: DAVID Tudhope Date: 2-15-2024 - see attached

Construction was begun Dec, 20 16 and completed DEC, 20 23

Approval granted by P.C. or Z.B.A. on Dec. 11, 20 14. reference PC approval # 2014-38

Use of premises intended Single Family House 3 bdrm, attached garage, porch open + enclosed
(type of use) (designed for 4 bdrm) deck, deck, unfinished basement

Applicant's Signature: Palmer J Irish Telephone: 602 588-0340 Cell: _____
Email Address: palmer Irish@hotmail.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.
If with conditions, see attachment outlining same.

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

12/17/24 Sharon Kelley
Date _____ Zoning Administrator



State of Vermont
Department of Environmental Conservation

Agency of Natural Resources
Drinking Water and Groundwater Protection Division

**WASTEWATER SYSTEM AND POTABLE WATER SUPPLY
INSTALLATION CERTIFICATION**

LAWS/REGULATIONS INVOLVED

10 V.S.A. Chapter 64, Potable Water Supply and Wastewater System Permit
Wastewater System and Potable Water Supply Rules, Effective November 06, 2023

System Identification

Permit Number: WW-4-4297-1 Lot Number: 2

Certification

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.

This document was digitally signed by David Allyn Tudhope, Designer, on 5/1/2024 4:06:34 PM through the submission of ANROnline Installation Certification Form.

This certification is based on an inspection of the related systems on 02/15/2024.

Required Information for Town Records

Place Town Recording Stamp Here

Parcel ID: 2074006002

SPAN: 207-067-15851

Town: Essex

Landowner's Name(s): Palmer and Katherine
Irish

911 Address: 173 Lost Nation Road Essex
Vermont 05452