

TOWN OF ESSEX

APPLICATION FOR CERTIFICATE OF OCCUPANCY

No. 71-88

Dec. 1, 1988

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 # 71-88 PB-4-1439

issued May 6, 1988 to Forestdale Heights, Inc.

(NAME)

Premises are at Unit A-1 Saxonhollow Drive, Essex, Vermont

(STREET ADDRESS)

The Saxon Hollow Company
P.O. Box 4201
Burlington, Vermont 05401

Applicants Mailing Address (If different) _____

Driveway location inspected and approved by _____

Water service installation inspected and approved by R. Safford

Sanitary sewer connection or septic system inspected and approved by:

G. Shortskere

(NAME)

(DATE)

, 19 _____

Construction was begun May, 1988 and completed 12-1, 1988

Actual cost of construction \$ 60,000.00

Approval granted by Planning Commission Zoning Board of Adjustment March 3, 1988 March 10, 1988

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

Daytime phone # 658-4022, _____, 19 _____
(DATE)

(Applicant's Signature)

Certificate of Occupancy approved with _____ without conditions.

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

Dec. 1, 1988

Zoning Administrator
Town of Essex, Vermont



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:

A-1, 7 Saxon Hollow Drive, Essex Jct.

owned by: Carolyn J. Tomlinson

_____ 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 E. Firkey
Jerry E. Firkey
Zoning Administrator

Date: 1-25-99

YOUR NAME: Linda Wood

FAX NUMBER: 660 0503

PERMIT #: 71-88

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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