

TOWN OF ESSEX CERTIFICATE OF OCCUPANCY APPLICATION

DATE OF REQUEST: _____ FEE: \$85.00 PD (includes recording)

MAP/PARCEL/LOT: 082-003-118

NO. 2016-144

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 # 2016-144

issued to FORESTDALE GROUP LLC on 9-14-16.

Premises are at 14 INDIGO LANE (BLDG 18A)

Water service installation inspected and approved by A. MARTIN P.W.

Driveway location inspected and approved by P/C SITE PLAN P.W.

Sanitary sewer connection or septic system inspected and approved by:

Name: TOWN Date: (SEE FILE) P.W.

Construction was begun 9-15, 2016 and completed _____, 20____

Approval granted by P.C. or Z.B.A. _____ on 11/3, 1999.

Use of premises intended RESIDENTIAL 3 bedroom townhouse 2 car attached garage
(type of use) open porch, deck, unfinished basement

Applicant's Signature: [Signature] Telephone: 879-0403 Cell: 316-0991
FAX 879-0037

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.

9-21-17
Date

[Signature]
Zoning Administrator