

TOWN OF ESSEX

APPLICATION FOR CERTIFICATE OF OCCUPANCY

No. 209-94

Feb 16, 1995

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 # 209-94

issued 10/4, 1994 to Holmes / GRANT CORSON

Premises are at 11 Weed Rd.

Water service installation inspected and approved by private well

Driveway location inspected and approved by D. Lutz

Sanitary sewer connection or septic system inspected and approved by:

Name: Donald Hamlin Cons. Eng. Date: _____

Construction was begun 10/28, 1994 and completed _____, 19____

Approval granted by: P.C. Z.B.A. _____, 19____.

Use of premises intended single family house
(type of use)

Applicant's Signature: Grant Corson

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 approved with _____ without conditions
If with conditions, see attachment outlining same.

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

Date 2/21/95

Jerry L. Purkey
Zoning Administrator, Town of Essex, VT

Appeal Period Expires 10/21/94
Zoning District AR

Town of Essex, Vermont
Application for Zoning Permit

Application Date 10/4/94
Permit No. 209-94

The undersigned hereby applies for permission to make certain improvements as described below. (Plans to be submitted, if required by Zoning Administrator.) All construction is to be completed in accordance with the Zoning Regulations of the Town of Essex and the State of Vermont and any and all Federal and State regulations now in effect. You are required to post this permit in a conspicuous location on the property and it must remain posted throughout the construction period.

Any interested person may appeal the decision of the Zoning Administrator to the Zoning Board of Adjustment within fifteen (15) days of permit. Commencing construction within this fifteen (15) day appeal period is prohibited by law.

Approval is subject to accuracy of information provided by the applicant.

A Parcel Account Number (Map-Parcel-Lot): 8 - 26 - 1
Property Address: 11 Weed Rd.
Owner or Project Name LAWRENCE & DONNA HOLMES
Owner Address: 59 Weed Rd Essex Jct H.
Owner Phone: (work) 878-3044 (home) SAME
Estimated Dates of Construction: Start 10/28/94 Completion 21/1/95
Sq. Feet: 864 Estimated Cost (labor & materials): 35,000

G

Check box(es) which describe proposed use or construction (circle choice in parentheses).
N = New A = Addition R = Remodel
Residential **N** A R
Single family
Two-family (duplex)(other)
Multi-family
Condominium (1-story)(other)
Mobile home
Vacation
Inclusions or Additions:
Garage: (attached)(detached)
Porch: (enclosed)(open)(deck)
Pool: (in)(above) ground
Shed
Barn: (residential)(agricultural)
Non-residential:
Retail
Office
Industrial
Other:
Change in use
Miscellaneous
Renewal

B Sewage Disposal (Please attach Sewer or Septic Application.)
Public Private Connection Fee 40.00 Date Paid: 10/4/94
Existing bedrooms: _____ Bedrooms added (if any) 1 Plan Attached
Approved Rejected By _____ Date 1/1

C Water (Please attach Water Service Application.) private well.
Public Private Fee: _____ Date Pd: 1/1
Number of meters: _____ Request date: _____
Approved by _____ Date 1/1

D Driveway (Please attach copy of approved Curbcut/Utility Application.)
Date of approval: 1/1

E Diagram Show sketch of project here or attach a plan. Please provide all relevant information as listed on the instruction sheet.
Please Refer to plan attached
F Signature of Owner Lawrence & Donna Holmes

Office Use Only
Fees: Type Amount Date Pd
Permit 52.50 10/11/94
School _____ 1/1
Recreation _____ 1/1
Other _____ 1/1
Building Permit
Approved Rejected Date 10/5/94
Issued to: L & D Holmes
Zoning Admin. J. J. Purdy
Notes: _____
Zoning Board of Adjustment
Approved Rejected Date 1/1
Planning Commission
Approved Rejected Date 1/1