

TOWN OF ESSEX CERTIFICATE OF OCCUPANCY APPLICATION

MAP/PARCEL/LOT: _____

NO. 74-97

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 # 74-97

issued 4-29, 1997 to ~~4-29-98~~ Kevin + Paula Bean

Premises are at 10 Saxon Hollow Essex Jct, VT 05452

Water service installation inspected and approved by Town of Essex - Water Dept.

Driveway location inspected and approved by Dennis Lutz

Sanitary sewer connection or septic system inspected and approved by:

Name: Town of Essex Date: June 97

Construction was begun 5-14, 1997 and completed 7-14, 1997

Approval granted by _____ P.C. or Z.B.A. on _____, 1997

Use of premises intended Primary Residence
(type of use)

Applicant's Signature: Paula Bean Telephone: (W) 878-3615
(H) 872-8992

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.

9/14/97
Date

Jerry L. Firkey
Jerry L. Firkey, Zoning Administrator