

TOWN OF ESSEX

CERTIFICATE OF OCCUPANCY APPLICATION

MAP/PARCEL/LOT: 099-003-027

NO. 99-301

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 # 99-301

issued 12/14, 1999 to X/O

Premises are at 29 Fox Run Rd (Unit 21)

Water service installation inspected and approved by J. Kamb

Driveway location inspected and approved by D. Luty

Sanitary sewer connection or septic system inspected and approved by:

Name: J. Kamb Date: _____

Construction was begun 12/14, 1999 and completed _____, 19____

Approval granted by ☒ P.C. or Z.B.A. _____ on _____, 19____.

Use of premises intended Residential
(type of use)

Applicant's Signature: [Signature] Telephone: 878 3303

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.

4/25/00
Date

[Signature]
Jerry L. Firkey, Zoning Administrator