

TOWN OF ESSEX CERTIFICATE OF OCCUPANCY APPLICATION

DATE OF REQUEST: 11/22/04

MAP/PARCEL/LOT: D10-006-004

NO. 2004-283

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 # 2004-283

issued to Glenn & Karen Merrill on 11-15-04

Premises are at 43 Lost Nation Road

Water service installation inspected and approved by N/A

Driveway location inspected and approved by N/A

Sanitary sewer connection or septic system inspected and approved by:

Name: _____ Date: _____

Construction was begun _____, 20____ and completed _____, 20____

Approval granted by _____ P.C. or Z.B.A. on _____, 20____

Use of premises intended Residential
(type of use)

Applicant's Signature: Karen Merrill Telephone: 879-7457

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.

11/22/04
Date

[Signature]
Jerry L. Firkey, Zoning Administrator

SEPTIC
DESIGNED BY
TRUWELL CONSULT.
ENGINEERS FOR
3 BED ROOMS
HAE
11/22/04

UNDERSTANDING
THAT EXISTING HOME
IS 3 BED ROOMS
HAE
11/22/04