

Appeal Period Expires 5/28/25
Zoning District I1

Town of Essex, Vermont
Application for Zoning Permit
(Building Permit)

Application Date / /
Permit Number 2025-666

- Contact State Permit Specialist Jeff McMahon (477-2241) to check for state permitting and/or setbacks.
- Post permit card visible to the road immediately as Permit is appealable within 15 days of issuance.
- Call the Zoning Administrator at 878-1343 to schedule a Certificate of Occupancy inspection if indicated below as required.
- Call the Assessor at 878-1345 to schedule a re-assessment upon completion of work.
- Provide a diagram showing proposal and any easements, well or septic locations, etc.

SIGN HERE: _____

A Parcel Account Numb. (Map-Parcel-Lot) 2- 076-020-000
Property Address: 302 Colchester Rd
Owner: Santo's Roots LLC / Chris DeStefano
Owner Address: PO Box 8327
Owner Phone: (work) 802-779-5900 (Cell) 802-777-1598
(Email) Chris@distefanolandscaping.com
Tenants name: _____ Phone: _____
(or contractor) Cell: _____
Estimated Construction Dates: Start: 6/1/25 Completion: 4/1/26
Sq. Feet: 4800 Estimated Cost (labor & materials): \$ 800,000

B Sewage Disposal (Please attach Sewer and/or State Septic Approval).
Public Septic Connection Fee \$ _____ Date Paid: / /
Proposed New Bedrooms: _____ Existing Bedrooms: _____
4-4519-1

C Water (Please attach Water Service Application if applicable).
Public Well Fee \$ _____ Date Paid: / /

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

E Stormwater
 Project disturbs an area greater than or equal to 1 acre – Erosion Control Permit Required. Attach completed permit application.
 Project creates new or expands existing impervious surface greater than or equal to 1/2 acre – Erosion Control Permit and Stormwater Management Permit required. Attach completed permit application.

F Diagram – Show a sketch of project on reverse of this application with property lines, building, and setbacks or attach separate sheet.

To be constructed pursuant to Planning Commission # 2024-9 issued on 9-12-2024

Signature of Tenant and Signature of Owner _____

G

Check box(es) which describe proposed use of construction (circle choice in parenthesis).
N = New A = Addition R = Remodel

<i>Residential:</i>	N	A	R
Single Family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two-family (duplex)(other)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multi-family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condominium / Townhouse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobile home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Inclusions or Additions:</i>			
Garage (attached) (detached)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Porch (enclosed) (open)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Deck	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pool (in) (above) ground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Barn (residential) (agriculture)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Non-residential:</i>			
Commercial / Industrial	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Stormwater:</i>			
Stormwater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Erosion Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Other:</i>			
Change in use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Miscellaneous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Renewal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ <u>4800</u>	<u>5/12/25</u>
Recreation		\$ _____	<u> / / </u>
Recording		\$ <u>30</u>	<u>5/12/25</u>
Certificate of Occ		\$ <u>100</u>	<u>5/12/25</u>
Other		\$ _____	<u> / / </u>

Building Permit
Approved Rejected Date 5/13/25

Issued to: Santo's Roots LLC

Zoning Administrator: Tham Kelley

Notes: _____

C.O. Required (Certificate of Occupancy) Yes No

**THIS PERMIT VALID FOR TWELVE (12) MONTHS FROM DATE OF ISSUE
RENEW FOR 1 YEAR (FREE) IF NOT EXPIRED**