

Appeal Period Expires 7/1/25
 Zoning District AR / SEPO

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

Application Date 6/3/2025
 Permit Number 2025-82

- 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: Alyssa Stephani

A Parcel Account Numb. (Map-Parcel-Lot) 2- 014046.012
 Property Address : 218 Chapin Rd, Essex, VT, 05452
 Owner: Lauren Cray + Charles A. Morenus
 Owner Address: 218 Chapin Rd, Essex, VT, 05452
 Owner Phone: (work) _____ (home) _____
 (cell) 802) 338-5723 (Email) laurencray@gmail.com
 Tenants name: _____ Phone: _____
 Cell: _____
 Estimated Construction Dates: Start: 7/18/2025 Completion: 7/18/2025
 Sq. Feet: _____ Estimated Cost (labor & materials): \$ 8333.74

G

Check box(es) which describe proposed use or 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 checked="" 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 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"/>

B Sewage Disposal (Please attach Sewer or Septic Application).
 Public Septic Connection Fee \$ _____ Date Paid: ___/___/___
 Proposed New Bedrooms: ___ Existing Bedrooms ___

C Water (Please attach Water Service Application).
 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 ½ 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.

G Door Replacement
 Signature of Tenant and _____ see attached CoW pg 3
 Signature of Owner _____

Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ <u>75</u>	<u>6/11/25</u>
Recreation		\$ _____	_____/_____/_____
Recording		\$ <u>15</u>	<u>6/16/25</u>
Certificate of Occ		\$ _____	_____/_____/_____
Other		\$ _____	_____/_____/_____

Building Permit
 Approved Rejected Date 6/16/25

Issued to: L. Cray + C. Morenus

Zoning Administrator: Sharon Kelley

Notes: _____

C.O. Required Yes No

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

Hello,

Included is a check and permit application for a window replacement project at 218 Chapin Rd on the behalf of Lauren Cray.

A signed form giving Pella permission to apply for permits on the homeowner's behalf is also included.

The project consists of 2 Full Frame Replacement units that are Fixed units mulled to DHs. One unit requires us to decrease an opening and re-frame below the new unit. No changes to header. The estimated cost of construction is \$8333.74.

Please reach out with any questions.

Best,

Alyssa Stephani- Pella Products

802-864-5435

sburlingtonsa@pellasales.com



Pella Products Inc.
155 Main Street
Greenfield, MA 01301

To Whom it may Concern:

I, Lauren Cray, as property owner, give permission to our contractor, Pella Products Inc. to obtain a building permit for the installation of windows and/or doors in my home.

Located at; 218 Chapin Road
Essex Jct., VT 05452

Please accept this letter in place of my signature on the permit application.

Thank you,

Signed by:
Lauren Cray
Signature: _____
8416331D86CA4CA...

Date: 5/12/2025