

Appeal Period Expires 7/17/25
 Zoning District AR/C1

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

Application Date 7/1/25
 Permit Number 2025-100

- 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: David C. Marcotte

A Parcel Account Numb. (Map-Parcel-Lot) 2-018-004-001
 Property Address: 344 Old Stage Rd
 Owner: David + Dina Marcotte
 Owner Address: Same
 Owner Phone: ~~(Home)~~ 802-879-1357 (Cell) 802-238-5591
 (Email) _____
 Tenants name: N/A Phone: _____
 (or contractor) Self Cell: _____
 Estimated Construction Dates: Start: 8/1/25 Completion: 10/1/25
 Sq. Feet: 175' Estimated Cost (labor & materials): \$ 8,000

G

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

Residential:

Single Family	N	A	R
Two-family (duplex)(other)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>

Inclusions or Additions:

Garage (attached) (detached)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Porch (enclosed) (<u>open</u>)	<input type="checkbox"/>	<input checked="" 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"/>

Non-residential:

Commercial / Industrial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Stormwater:

Stormwater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Erosion Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other:

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 and/or State Septic Approval).
 Public Septic Connection Fee \$ _____ Date Paid: ___/___/___
 Proposed New Bedrooms: 0 Existing Bedrooms 2

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: ___/___/___ existing

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.

Office Use Only

Fees:	Type	Amount	Date Pd
Permit		\$ <u>75</u>	<u>7/1/25</u>
Recreation		\$ _____	___/___/___
Recording		\$ <u>15</u>	<u>7/1/25</u>
Certificate of Occ		\$ _____	___/___/___
Other		\$ _____	___/___/___

Building Permit 7/2/25
 Approved Rejected Date ___/___/___

Issued to: David + Dina Marcotte
 Zoning Administrator: Sharon Kelley

Notes: _____

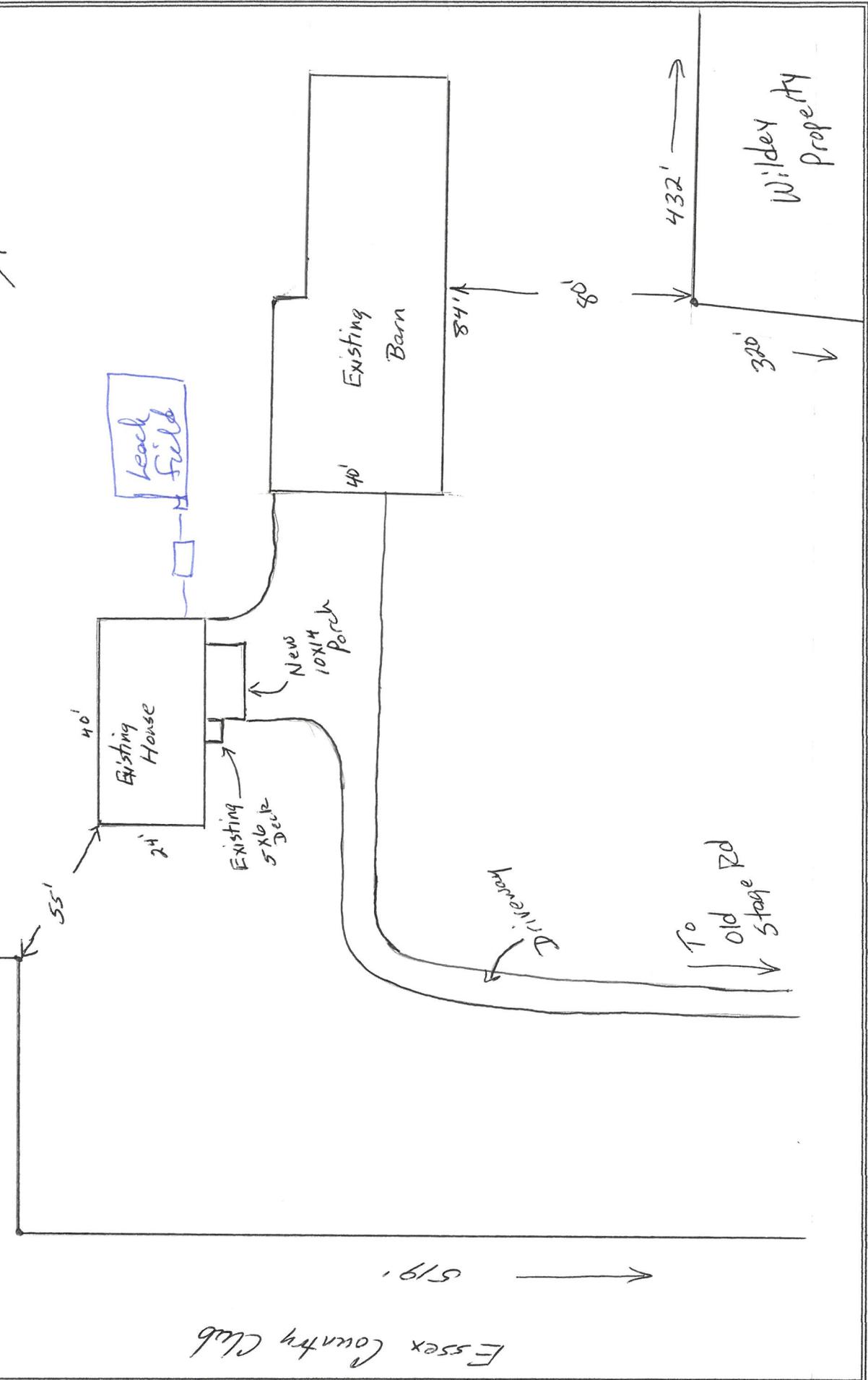
Signature of Tenant and
 Signature of Owner David C. Marcotte

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

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

O well

F Diagram - Provide diagram here and include all setbacks



Essex Country Club

Wilkey Property

To Old Star Rd

Driveway

Existing Barn

Existing House

Existing 5' x 6' Deck

New 10' x 14' Porch

Leach Field

95'

519'

432'

300'

84'

40'

55'

40'

24'

1177'