

TOWN OF ESSEX
CERTIFICATE OF OCCUPANCY APPLICATION

DATE OF REQUEST: June 27, 2025 FEE: \$115.00 PC NO. 2025-97
(includes recording)

MAP/PARCEL/LOT: 2 - 091 - 001 - 008

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.

Issued to Elizabeth Jacobs MA, LCMHC, PLLC on 6-30-2025.

Premises are at 8 Carmichael St, Ste 206, Essex Jct VT 05452

Water service installation inspected and approved by existing

Driveway location inspected and approved by existing

Sanitary sewer connection or septic system inspected and approved by:

Name: _____ Date: existing

~~Construction~~ was begun Paint - Fit up for use July, 20 25 and completed July 15, 2025

Approval granted by DRB _____ PC _____ ZBA _____ on PCA, 20 _____.

Use of premises intended office - consultation
(type of use)

Applicant's Signature: E Jacobs

Phone: _____ Cell: 802.557.8027 Email: bethjaco210@gmail.com

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.

7-16-2025
Date

Shawn Kelley
Zoning Administrator