

Appeal Period Expires 10 / 30 / 25  
 Zoning District A2

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

Application Date \_\_\_ / \_\_\_ / \_\_\_  
 Permit Number 2025-164

- Prior to construction, you are responsible for identifying and obtaining all necessary State permits and approvals, including State environmental permits from the VT Agency of Natural Resources. For State environmental permits, visit the Permit Navigator ([dec.vermont.gov/permitnavigator](http://dec.vermont.gov/permitnavigator)). For further assistance, contact the Department of Environmental Conservation's Environmental Assistance Office at [ANR.DECAssistance@vermont.gov](mailto:ANR.DECAssistance@vermont.gov) or 802-828-0141.
- Post permit card visible to the road immediately as Permit is appealable within 15 days of issuance and during construction.
- 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:** Judith J. Erikson

**A**

Parcel Account Number (Map-Parcel-Lot): 2- 049 051 .000  
 Property Address: 12 WOODLAWN DR  
 Owner: Judith J. Erikson  
 Owner Address: SAME  
 Owner Phone 1: 802-878-1261 Phone 2: 802-734-4700  
 Email: vtjudy43@comcast.net  
 Tenants/Contractor Name: N/A SELF  
 Phone: above N/A Email: same as above  
 Estimated Construction Dates: Start: 11 / 3 / 25 Completion: 11 / 10 / 25  
 Square Feet: 200 Estimated Cost (labor & materials): \$ 500

**B**

**SEWAGE DISPOSAL** (Please attach State Septic Approval or Sewer Service Application)  
 Public  Septic  Connection Fee: \$ \_\_\_\_\_ Date Paid: \_\_\_ / \_\_\_ / \_\_\_  
 Proposed New Bedrooms: \_\_\_\_\_ Existing Bedrooms: \_\_\_\_\_

**C**

**WATER** (Please attach Water Service Application)  
 Public  Well  Connection Fee: \$ \_\_\_\_\_ Date Paid: \_\_\_ / \_\_\_ / \_\_\_

**D**

**FIRE IMPACT FEE**  
 Proposed New Bedrooms: \_\_\_\_\_ Fee: \$ \_\_\_\_\_ Date Paid: \_\_\_ / \_\_\_ / \_\_\_  
 Non-residential: Square Feet: \_\_\_\_\_ Number of Employees: \_\_\_\_\_

**E**

**DRIVEWAY** (Please attach copy of approved Curb Cut / Utility Application)  
 Date of approval: \_\_\_ / \_\_\_ / \_\_\_ EXISTING

**F**

**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 surfaces  $\geq \frac{1}{2}$  acre – Erosion Control Permit and Stormwater Management Permit required. Attach completed application permit.

**G**

Diagram – show a sketch of project on reverse of this application or separate sheet with property lines, buildings and setbacks.

Signature of Tenant and  
 Signature of Owner Judith J. Erikson

**H**

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 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 ground) (above ground)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Barn (residential) (agricultural)	<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 <u>CARPORT</u>	<input checked="" 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:	Amount	Date Paid
Permit	\$ <u>75</u>	<u>10 / 15 / 25</u>
Recreation	\$ _____	___ / ___ / ___
Recording	\$ <u>15</u>	___ / ___ / ___
Certificate of Occ.	\$ _____	___ / ___ / ___
Other	\$ _____	___ / ___ / ___

**BUILDING PERMIT**  
 Approved  Rejected  Date 10 / 15 / 25  
 Issued to: Judith Erikson  
 Zoning Administrator: Sharon Kelley  
 Notes: \_\_\_\_\_  
 Certificate of Occupancy Required Yes  No

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

G Diagram - Provide diagram here and include all setbacks.

WOODLAWN DR

