

Appeal Period Expires 3/10/26  
Zoning District R1

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

Application Date 1/1  
Permit Number 2026-15

- 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:** Kelsey Fink

Parcel Account Numb. (Map-Parcel-Lot) 2-011-005-003

Property Address: 47 Bixby Hill Rd

Owner: Michael & Kelsey Fink

Owner Address: 47 Bixby Hill Rd

Owner Phone: (work) \_\_\_\_\_ (Cell) 207 808 3318

(Email) mcfink@gmail.com

Tenants name: Red Rose Renovations Phone: 802-389-1271  
(of contractor) Cell: \_\_\_\_\_

Estimated Construction Dates: Start: 4/1/26 Completion: 5/15/26

Sq. Feet: 420 Estimated Cost (labor & materials): \$39,000

**Sewage Disposal** (Please attach Sewer and/or State Septic Approval).

Public  Septic  Connection Fee \$ \_\_\_\_\_ Date Paid: 1/1

Proposed New Bedrooms: 0 Existing Bedrooms 3

**Water** (Please attach Water Service Application if applicable).

Public  Well  Fee \$ \_\_\_\_\_ Date Paid: 1/1

**Driveway** (Please attach copy of approved Curbcut / Utility Application).

Date of approval: 1/1 existing

**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.

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

Signature of Tenant and  
Signature of Owner

See Attached  
Michael Linn

**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 checked="" 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	<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:	Amount	Date Paid
Permit	\$ <u>105.30</u>	<u>2/23/26</u>
Recreation	\$ _____	<u>1/1</u>
Recording	\$ <u>15</u>	<u>2/23/26 PAM</u>
Certificate of Occ.	\$ _____	<u>1/1</u>
Other	\$ _____	<u>1/1</u>

**BUILDING PERMIT**

Approved  Rejected  Date 2/23/26

Issued to: MCF + KB Fink

Zoning Administrator: Sharon Kelley

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Certificate of Occupancy Required Yes  No

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

F Diagram - Provide diagram here and include all setbacks

