

TOWN OF ESSEX

CERTIFICATE OF OCCUPANCY APPLICATION

DATE OF REQUEST: _____ FEE: \$115.00 pd NO. 2024-211
(includes recording)

MAP/PARCEL/LOT: 2 - 069 - 010 - 000

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 Greg Desautels d/b/a 25 Pinecrest Dr LLC on 11-15-24.

Premises are at 25 Pinecrest Dr Essex VT

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: existing Date: _____

Construction was begun _____, 20____ and completed none needed (as is), 20____

Approval granted by DRB PC ZBA _____ on 11/15, 20____.

Use of premises intended 4 Bedroom residential unit of duplex bldg,
(type of use) currently has a commercial meter -
plw okay - Landowner wants to keep as
is for now.

Applicant's Signature: _____

Phone: _____ Cell: 802-355-0413 Email: gregdesautels@me.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.

1-26-2026
Date
Shawn Kelley
Zoning Administrator