Appeal Period Expires 7/12/24
Zoning District R2

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

Application Date 6/27/24
Permit Number 2024-120

- 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:** Don West

**A**

**Parcel** Account Numb. (Map-Parcel-Lot) 2- 048-004-101

Property Address : 45 E/SA LANE

Owner: Don Weston d/b/a JMW Investments LLC

Owner Address: 349 Commerce St Williston VT

Owner Phone: (work) _____ (Cell) 802 238 7652

(Email) dwei@donwestonexcavating.com

~~Tenants name~~: SAME Phone: _____
(or contractor) Cell: _____

Estimated Construction Dates: Start: 7/20/24 Completion: __/__/__

Sq. Feet: 1961 Estimated Cost (labor & materials): $160,000

**B**

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

Public ☒ Septic ☐ Connection Fee $ 2484 Date Paid: 6/27/24

Proposed New Bedrooms: 3 Existing Bedrooms 0

**C**

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

Public ☒ Well ☐ Fee $ 1826 Date Paid: 6/27/24

**D**

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

Date of approval : __/__/__

**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 ½ 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.

**G**

To be constructed pursuant to Planning Commission Approval # PC: 2023-69, issued on 4.27-2023.

Signature of Tenant and Signature of Owner Don West

**G**

Check box(es) which describe proposed use or construction (circle choice in parenthesis).

N = New A = Addition R = Remodel

| | N | A | R |
|---|---|---|---|
| *Residential:* | | | |
| Single Family | ☐ | ☐ | ☐ |
| Two-family (duplex) (other) | ☒ | ☐ | ☐ |
| Multi-family | ☐ | ☐ | ☐ |
| Condominium / Townhouse | ☐ | ☐ | ☐ |
| Mobile home | ☐ | ☐ | ☐ |
| *Inclusions or Additions:* | | | |
| Garage (attached) (detached) | ☐ | ☐ | ☐ |
| Porch (enclosed) (open) | ☐ | ☐ | ☐ |
| Deck | ☐ | ☐ | ☐ |
| Pool (in) (above) ground | ☐ | ☐ | ☐ |
| Shed | ☐ | ☐ | ☐ |
| Barn (residential) (agriculture) | ☐ | ☐ | ☐ |
| *Non-residential:* | | | |
| Commercial / Industrial | ☐ | ☐ | ☐ |
| *Stormwater:* | | | |
| Stormwater | ☐ | ☐ | ☐ |
| Erosion Control | ☐ | ☐ | ☐ |
| *Other:* | | | |
| Change in use | ☐ | ☐ | ☐ |
| Miscellaneous | ☐ | ☐ | ☐ |
| Renewal | ☐ | ☐ | ☐ |

## *Office Use Only*

| Fees: | Type | Amount | Date Pd |
|---|---|---|---|
| Permit | 1x time | $ 432 | 6/27/24 |
| Recreation | Fee for all | $ 10,088 | 6/27/24 |
| Recording | | $ 30 | 6/27/24 |
| Certificate of Occ | | $ 100 | 6/27/24 |
| Other | W+S | $4310 | 6/27/24 |

AM

**Building Permit**

Approved ☒ Rejected ☐ Date 6/27/24

Issued to: JMW Investments LLC

Zoning Administrator: Sharon Kelly

Notes: ROCS requirement (notified)

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

02/13/17

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

# TOWN OF ESSEX, VERMONT
# APPLICATION FOR CURB CUT / UTILITY PERMIT

Pursuant to Title 19 V.S.A. Section 43. Application for curb cut and Utility Installation in Town Right-of-Way

All applications for curb cuts and utility installations shall be submitted to the Director of Public Works / Town Engineer for review. Applicants shall submit the information requested on this form and any additional information requested by the Director of Public Works / Town Engineer for a clear understanding of this application. The permit is issued under authority of the Town Manager in accordance with Section 601 of the Town Charter and 24 V.S.A. paragraph 1236 (2).

Application No. _____ / 6/27/24
Date

Property Address: 45 ELSA LN

Owner Address: 349 Commerce St williston

Owner Name: (Don Weston) SMW Investments LLC

Phone Number: (home) _____ (work) _____ (cell) 802-238-7652

Tax Map # 048 Tax Parcel 004 Tax Lot 101

Application is for: (check one)

A) New Curb Cut ☒ B) Utility Installation: Overhead ☐ Underground ☐

Please use attached diagram to describe location and type of installation.

Comments by Director of Public Works / Town Engineer:

Culvert : Yes ☐ No ☐ Water Bar(s) : Yes ☐ No ☐

Culvert Diameter: (18 inch minimum) _____ Total length of Culvert: (30 foot minimum) _____

Signature of Owner:

Don Weston

*** FOR OFFICE USE ONLY ***

Fee Paid $_____

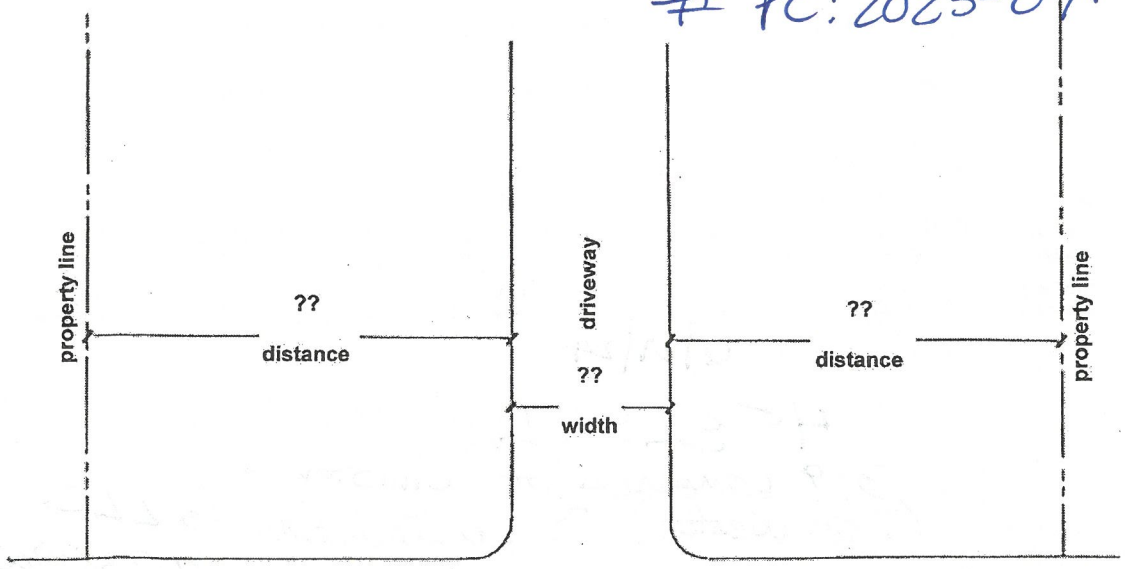
Approved ☐ Rejected ☐

Per Authority of the Town Manager by the Director of Public Works / Town Engineer

1. Culvert must be HIGH DENSITY POLYETHYLENE (HDPE) PIPE
2. Culvert will be purchased by the Applicant
3. Culvert will be purchased and installed by the applicant. The Town of Essex Department of Public Works will inspect.

Note: A MINIMUM OF 24 HOURS NOTICE IS REQUIRED PRIOR TO COMMENCEMENT OF CONSTRUCTION. WITHIN 24 HOURS OF COMPLETION, THE APPLICANT IS REQUIRED TO NOTIFY THE DIRECTOR OF PUBLIC WORKS / TOWN ENGINEER FOR INSPECTION PURPOSES.

To be constructed pursuant to Planning Commission Approved # PC: 2023-09.




45 ELSA LANE

STREET NAME

Comments and / or special instructions from Director of Public Works / Town Engineer :

**NOTE:** A MINIMUM OF 24 HOURS IS REQUIRED PRIOR TO COMMENCEMENT OF CONSTRUCTION. WITHIN 24 HOURS OF COMPLETION, THE APPLICANT IS REQUIRED TO NOTIFY THE DIRECTOR OF PUBLIC WORKS / TOWN ENGINEER FOR INSPECTION PURPOSES.

# TOWN OF ESSEX
# WATER/SEWER HOOKUP FEES

**DATE:** 6/27/24

**MAP/PARCEL/LOT:** 2-048-004-101

**NAME:** Don Weston

**LOCATION:** 45 Elsa Lane

| G/L A/C # | A/C NAME | | AMOUNT |
|---|---|---|---|
| 51-34821.000 | Water hookup fees - regular | (33) | 1826 |
| | Other _____ | | |
| 51-35522.000 | CAPITAL RESERVE<br>- # of gallons 140 x $10.60 = 1484 | (36) | 1484 |
| 51-35521.000 | SEWER CONNECTION FEE | (37) | 1000.00 |
| 35501.000 | Special Assessment | | |
| | Reason | | |
| | TOTAL REC'D | | 4,310 |

# Town of Essex

## Application for Sewer Service

Revised Dec 2022

The undersigned, being the owner / owner's agent of the property located at:

Street Address: 45 ELSA LANE Development: Weston WOODS

Tax Map # 048 Tax Parcel 004 Tax Lot 101

Does hereby request a permit to install and connect a building sewer to

serve 2 unit(s) ☒ Residential ☐ Commercial ☐ Industrial structure

| Installer / Contractor: | Property Owner: |
|---|---|
| Name: DNE (Don Weston) | Name: Same |
| Address: | Address: |
| Email: | Email: |
| Phone: 802.238.7652 | Phone: |

The owner / agent agrees:

a) That all work shall be in accordance with the Town Sewer Ordinance, the Town Public Works Specifications, and all other pertinent ordinances or regulations of the Town of Essex.
b) To install and maintain the private building sewer at no expense to the Town.
c) To notify the Public Works Office twenty four hours prior to the start of construction for inspection purposes. No part of the sewer line may be covered until it has been inspected by the Town Representative.
d) To pay the sewer charges (construction and operations) which are billed as set forth in the water/sewer fee schedule.

Signed: Don Weston Date: 06-27-24

(Signature of Owner / Agent)

PLEASE MAKE CHECK PAYABLE TO TOWN OF ESSEX WATER AND SEWER DEPARTMENT AND RETURN ALONG WITH APPLICATION TO THE COMMUNITY DEVELOPMENT OFFICE.
DO NOT COMBINE WITH ZONING PERMIT FEE.

***For Office Use Only***

140 gallons / day x $10.60 = $ 1,484 + $1,000 = $ 2,484

Received by: BAM Date: 06-27-24

Approved by: _____ Date: __-__-__ ☐ Letter Sent ☐ Finance Notified

Inspected by: _____ Date: __-__-__ ☐ Tie Drawing ☐ Finance Notified

Master List Updated: ☐ Approved ☐ Inspected

# Town of Essex

## Application for Water Service

Revised May 2022

The undersigned, being the owner / owner's agent of the property located at:

Street Address: 45 ELSA LANE Development: Weston Woods

Tax Map # 048 Tax Parcel 004 Tax Lot 101

Does hereby request a permit to initiate water service as noted below to serve 1 unit(s) [X] Residential [ ] Commercial [ ] Industrial structure

Installer / Contractor:

Name: DWE (Don Weston)

Address: _____

Phone: _____

Cell: 802-238 7652

Property Owner:

Name: SAME

Address: _____

Phone: _____

Cell: _____

Firm Performing Main Line Tap:

Name: DWE

Address: _____

Phone: _____

Cell: _____

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1.) The above requested service includes the installation of a 3/4" x 5/8" water meter for residential use and up to a 2" simple meter for non-residential use. The information necessary to determine the correct meter size shall be supplied by the applicant (minimum to maximum range of use). Meters 5/8", 3/4" and 1" shall be installed by the Town. Meters above 1" shall be installed by the owner/applicant or qualified representative.

2.) Property owner / agent is responsible for and must provide all necessary excavation form the main to the building or structure.

3.) Property owner / agent agrees to provide the Town a minimum of 24 hours notice prior to installation for inspection purposes. No part of the water line may be covered until it has been inspected by the Town Representative.

4.) Property owner / agent agrees to restore all disturbed areas to original condition after the installation of said water service.

5.) The water service can be turned on only by an employee of the Town of Essex Water Department.

6.) Meter spacers must be obtained from the Town of Essex Water Department.

7.) The owner / agent agrees that all installation and work will conform to the Town Public Works Specifications and the Water Ordinance and Regulations of the Town of Essex.

8.) In consideration of water service supplied by the Town of Essex Water Department, I agree to be responsible for payment of all bills rendered and for all water used by me, my tenants, successors in tenancy or in ownership, and all persons at above locations, unless and until proper notice is given to the Town Water Department of termination of service on a specific date. I also agree to abide by all rules and regulations established by the Essex Water Department.

Signed : Don West Date: 06-27-24

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PLEASE MAKE CHECK PAYABLE TO TOWN OF ESSEX WATER AND SEWER DEPARTMENT.
DO NOT COMBINE WITH ZONING PERMIT FEE.

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All water services are subject to a service initiation fee as set by the Water/Sewer Fee Schedule adopted by the Selectboard. The following fee schedule shall apply to all municipal water connections.

**FOR OFFICE USE ONLY:**

140 gallons/day x $ 5.90 = $ 826 + $1,000 = $ 1,826

Connection Fee: $ 1826 Rcvd by: BAM Date: 06-27-24 ☑ Finance Notified

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Approved by: _____ Date: __-__-__ ☐ Letter Sent ☐ Finance Notified

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Inspected by: _____ Date: __-__-__ ☐ Tie Drawing ☐ Finance Notified

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☐ Meter Installed Date: __-__-__

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Master List Updated: ☐ Approved ☐ Inspected ☐ Metered

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