City of Essex Junction, VT Certification of Zoning Compliance

For Office Use: **Permit #**

Administrative Determination					
Property Address:					
Record Owners:	Owner Email:				
Requested by:					
Closing date:	Send Completed form to: Fax or email:				
Notes: 1. Zoning was first adopted in Ess 2. Certificates of Occupancy were	-		ember 4, 198.	5	
To be completed by Zoning Administra	ntor:				
I hereby certify as follows regarding the ab	ove referenced pr	operty:			
A zoning permit was issued on:					
2. A Certificate of Occupancy was issued on					
3. The property is in compliance with	Date				
	[] Yes	[] No	[] N/A		
B. The Certificate of Occupancy					
 4. The property appears to generally com 5. I am not aware of any existing violation property. 6. The municipal records in the City Plant City Land Development Code relating to 	ns of the City Land	Development	code relating	g to the above referenced	
Signature of Authorized Zoning Staff		 Da	 Date		
Comments:					
	Received on:	Fee:	Fee:		
		\$5	0.00	Α	

