

**TOWN OF ESSEX, VERMONT
ZONING PERMIT APPLICATION
FOR PERMITTED HOME OCCUPATIONS**

Appeal Period Expired: 2/19/21 Permit # 2021-214

Date: 1/1 Application Fee \$100 pd.

Applicant's Name and Address: Alma Smailhodzic

email ALMA-GABELA@hotmail.com 89 Saybrook Road, Essex Jct, VT 05452

Type of Home Occupation: Home Bakery - see attached

Phone Numbers: Home: NA Work: NA Cell: 802-557-4090

Zoning District: R2 Tax Map, Parcel, & Lot: 2 - 087 002 089

The undersigned hereby applies for permission to operate a Home Occupation pursuant to Section 25.11 of the Zoning Regulations.

Applicant's Signature Alma Smailhodzic

Approved on: 2/4/21 Denied on: 1/1

~~(See attachment for conditions of approval or reasons for denial.)~~

By: Sharon L. Kelly
Zoning Administrator

Should adhere to zoning regulations, Section 4.9(B) of sign size no greater than 3.S.F.

Any interested person may appeal the decision of the Zoning Administrator to the Zoning Board of Adjustment within 15 days of permit issuance. Commencing construction or operations within this 15 day appeal period is prohibited by law.

This permit is valid as long as you continue your business at the location you applied for and you do not alter the use in which you applied for.

Town of Essex

PERMITTED HOME OCCUPATION APPLICATION

- a) Fill out the attached questionnaire and pay application fee.
b) Provide floor plan of dwelling and indicate the square footage of the dwelling and area of home or accessory building to be used.
c) The Zoning Administrator may require additional information if needed to make a proper evaluation in a case by case basis.

PERMITTED HOME OCCUPATION QUESTIONNAIRE

GUIDELINES: Please fill out the information requested on this form. To help you with your application, attached you will find a copy of the Home Occupation Regulations (Section 25.11) from the Zoning Regulations. Your application will be judged on this information can criteria plus any additional information required by the Zoning Administrator.

Date: 01/06/21 Zoning District:
Landowner's Name: Alma and Orhan Smailhodzic
Applicant's Name: Alma Smailhodzic
Address of Home Occupation: 89 Saybrook Road, Essex Jct. 05452
Name of Home Occupation: Mattarello Baked Goods

I. TYPE OF USE

- 1. Nature of the Home Occupation Home Bakery, Cake decorating business
2. Does the Home Occupation include retail sales? [X] Y [] N
As the primary use? [] Y [X] N Secondary to other uses(s)? [] Y [X] N
3. Will the Home Occupation produce any objectionable noise, vibration, smoke, dust, electrical disturbance, odors, heat, or glare? Specify: NO

II. USE OF PROPERTY

- 1. Is the primary use of the property as a residence for the applicant? [X] Y [] N
2. Lot size: NA Road Frontage: NA
3. Number of buildings on property: 1
Total finished square footage of home: 1265
4. Building(s) to be used: Existing? [X] New?
5. Square footage of Home Occupation:
Inside House: Inside Other Bldgs: Outside:
Offices: NA NA NA
Working Area: 110 square feet NA NA
Storage: 30 sqft NA NA

III. METHOD OF OPERATION

- 1. Number of employees: Family 1 Non-family 0
- 2. Hours of operation: 9AM - 7PM Days of Week: Tuesday ~~through~~ through Saturday

IV. TRAFFIC AND PARKING

- 1. Projected traffic None Cars per day 1 or 2 Trucks per day 0
- 2. Parking: Applicant's vehicle(s) stored outside: NA

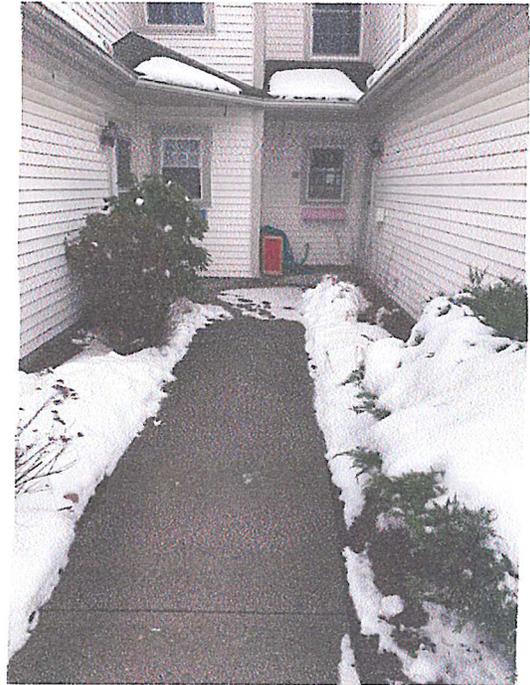
V. SIGN

- 1. Is a sign being requested? Y N
If so, maximum permitted size is 3 square feet. Size: _____

VII. MAP

- 1. Neat ruler drawing showing size of building and floor plan indicating area to be used.
- 2. Submit photographs of all sides of the building.
- 3. Submit a brief narrative describing your business.





Sharon Kelley

From: Orhan Smailhodzic <orhan4681@yahoo.com>
Sent: Thursday, February 4, 2021 11:08 AM
To: Sharon Kelley
Subject: Re: 89 Saybrook Road RE: Home bakery permit
Attachments: Association Email.docx

CAUTION: EXTERNAL MAIL. DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS YOU DO NOT TRUST

Hello,

So a brief description of the business and the operation. I would be using basic kitchen equipment to bake and decorate custom order cakes. Once the cakes are ready, 99% of the time the cakes will be delivered to the customer, so there would not be any significant increase in traffic to the neighborhood. There might be two people per week actually coming to the unit. I pick up my supplies at local stores, farms and wholesalers, so no deliveries are done to my home. I will not need any type of sign outside of my home, as it is all online based and all my advertising is through social media and I only do the cake decorating in my kitchen.

As far as any documentation from the association I have attached emails that I copied and pasted into a word document between them and my husband regarding this. They are aware of what I am doing. They assured me that I don't need any written permission, due to the fact that I am not putting up a sign, that there will be no deliveries to the unit and that the customer traffic will be insignificant.

Essentially this is my hobby, I enjoy making and decorating custom cakes, once I saw that I can sell them, I wanted to register the business and get a Tax ID so it can be legit. I will not have employees, or any wastewater other than washing the dishes and my tools in my sink. I have already passed my inspection with the health department so everything is in order. Please let me know what else you need from me. Thank you!

On Thursday, February 4, 2021, 10:15:47 AM EST, Sharon Kelley <skelley@essex.org> wrote:

Hi,

Just seeing this email!

To repeat, please send me an email narrative describing our business, customer visits to unit, documentation of approval from the Association, etc..

Know that you can only have a 3 s.f. sign for the business - the Association would need to ok that as well.

Once received, I will process application. Thanks and have a great day!

SK

-----Original Message-----

From: Orhan Smailhodzic <orhan4681@yahoo.com>
Sent: Wednesday, February 3, 2021 4:45 PM
To: Sharon Kelley <skelley@ESSEX.ORG>
Subject: Re: Home bakery permit

CAUTION: EXTERNAL MAIL. DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS YOU DO NOT TRUST

Hello,

I am just following up on this, I called a couple times yesterday and today, so we could speak but all I get is your voicemail. Please let me know what questions you have. Thank you!

John Metruk <artone@comcast.net>
To:Orhan Smailhodzic
Cc:artone@comast.net
Tue, Nov 17, 2020 at 12:15 PM
Orhan,

I don't see any problem with that as long as it doesn't impact the neighbors.
Stay safe and good luck,

John Metruk

> On 11/16/2020 6:04 PM Orhan Smailhodzic <orhan4681@yahoo.com> wrote:

>

>

> Hello Sir,

>

> I hope you are doing well and staying safe. I had a question to ask on behalf of my wife. She has a hobby designing and creating specialty cakes. She does it from time to time for people she might know. She wanted to see if she could register as a business or an at home bakery from our address here. She uses only the basic kitchen and equipment that she has in the unit. She would deliver the cakes to people that order them and buy her ingredinets herself and wouldn't get anything delivered to the unit. So it would not be a nuisance nor would it cause any additional traffic to the neighborhood. She wants to be able to have a tax ID number so she can sell her art to more people. I read through the bylaws and wasn't too sure that it's allowed or that it's not from what I read. Please let me, know if this is possible. Thank you!

| | | | | | |
|--|--|--------------------------------|---|--|--|
| Establishment MATTARELLO BAKED GOODS | | | License Type 11637 - Bakery - Home License | | |
| Physical Address 89 SAYBROOK RD | | | City/State/Zip Code Essex Junction/VT/05452 | | |
| Licensee Name MATTARELLO BAKED GOODS LLC | | | Inspection ID # 32483 | | |
| Date 1/29/2021 | Time In/Time Out 10:30 AM/10:50 AM | Telephone 8025574090 | Purpose of Inspection: Opening | | |

| Item | Debit Points | Description | Item | Debit Points | Description | Item | Debit Points | Description |
|---------------------------------------|--------------|--|--|--------------|--|---------------------------------------|--------------|---|
| Foodborne Illness Risk Factors | | | 17 | 0 | Thermometers, Chemical Kits and Pressure Gauges Provided | Insect & Rodent Control | | |
| Supervision | | | 18 | 1 | Single-Service Articles Stored and Dispensed | *35 | 4 | Establishment free of insects, rodents and pests |
| 1 | In | Person in charge present, demonstrates knowledge and performs duties | 19 | 2 | No Re-Use of Single-Service Items | Floors, Walls & Ceilings | | |
| Food Source | | | Food Equipment & Utensils - Cleanliness | | | 36 | 1 | Floors are properly constructed and maintained. |
| *1(a) | 5 | Food is obtained in sound condition and from acceptable sources. | 20 | 1 | Dry Cleaning and Pre-Cleaning Methods | 37 | 1 | Walls, ceilings and attached equipment are properly constructed and maintained. |
| Food Protection | | | 21 | 2 | Warewashing and Rinsing | Lighting | | |
| 2 | 1 | Food is in acceptable container and properly labeled. | *22 | 4 | Sanitization Rinse | 38 | 1 | Light bulbs are protected and of adequate intensity. |
| *3 | 5 | Potentially Hazardous Food Temperature Requirements | 23 | 1 | Use of Wiping Cloths | Ventilation | | |
| *4 | 4 | Preventing Cross Contamination | 24 | 2 | Cleaning Food-Contact Surfaces of Equipment and Utensils | 39 | 1 | Rooms and equipment have adequate and clean ventilation. |
| 5 | 1 | Adequate Facilities to Maintain Product Temperature | 25 | 1 | Cleaning of Nonfood-Contact Surfaces | Dressing Rooms | | |
| 6 | 2 | Thawing Potentially Hazardous Food | 26 | 1 | Storage of Clean Equipment and Utensils | 40 | 1 | Adequate and Clean |
| *7 | 4 | Unwrapped Foods: Return and Reservice | Water System | | | Miscellaneous Inspection Items | | |
| 8 | 2 | Food Protected from Contamination | *27 | 5 | Water Supply | *41 | 5 | Poisonous or Toxic Materials |
| 9 | 2 | Handling of Food Minimized | Sewage Disposal | | | 42 | 1 | Premises Free of Rubbish, Litter, Unnecessary Articles |
| 10 | 1 | In-Use Dispensing Equipment | *28 | 4 | Sewage System and Disposal | 43 | 1 | Separation from Food Operation Areas |
| Personnel | | | Plumbing | | | 44 | 1 | Clean and Soiled Linens |
| *11 | 5 | Restriction of Employees with Infections and Communicable Diseases | 29 | 1 | Plumbing Properly Maintained and Installed | Total Debit Points: 1 | | |
| *12 | 5 | Acceptable Hygiene Practices | *30 | 5 | No Cross-Connection, Backflow or Back Siphonage | Rating Score: 99 | | |
| 13 | 1 | Uniforms, Bib Aprons, and Effective Hair Restraints | Toilet & Handwashing Facilities | | | | | |
| Food Equipment & Utensils | | | *31 | 4 | Fixture Requirements | | | |
| 14 | 2 | Food & Ice Contact Surfaces | 32 | 2 | Miscellaneous | | | |
| 15 | 1 | Non-Food-Contact Surfaces | Garbage & Refuse Disposal | | | | | |
| 16 | 2 | Dishwashing Facilities | 33 | 2 | Facilities on the Premises | | | |
| | | | 34 | 1 | Construction and Cleanliness | | | |

| Observations and Corrective Actions | | | | |
|---|-------------------|----------------|--|-----------------|
| Violations cited in this report must be corrected within the inspector's specified timeframes | | | | |
| Item Number | Violation of Code | Priority Level | Comment | Correct By Date |
| 17 | 5-207.17 | | Testing strip was not provided to accurately measure the concentration of sanitizing solution - obtain a litmus paper test kit for quaternary ammonium (quats) sanitizing tablets. | |

Inspection Published Comment:
VIRTUAL INSPECTION – Due to COVID-19 health and safety guidelines, this inspection was conducted virtually using FaceTime; an on-site inspection was not conducted.

Approved for operation.

| Visit Date | Person In Charge | Person In Charge Signature | Sig. Date | Public Health Inspector | Public Health Inspector Signature | Sig. Date | Time In | Time Out |
|------------|---|----------------------------|-----------|-------------------------|--|-----------|----------|----------|
| 1/29/2021 | Alma Smalhodzic (Not Available to Sign) | | 1/29/2021 | Emily Jarecki |  | 1/29/2021 | 10:30 AM | 10:50 AM |