

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

Appeal Period Expired: 9/15/16 Permit # 2016-143H
Date: 7/22/2016 Application Fee: \$95 PASB
Applicant's Name and Address: ROSALIE SCHNEIDER
7 CEMETERY RD., ESSEX
Type of Home Occupation: PSYCHOTHERAPY, Mon-Sat 10am to 7pm
Phone Numbers: Home: 985-9162 Work: SAME Cell: 318-5282
Zoning District: R2 Tax Map, Parcel, & Lot: 2 - 050-032-000

The undersigned hereby applies for permission to operate a Home Occupation pursuant to Section 4.9 of the Zoning Regulations.

X Applicant's Signature Rosalie Schneider

Approved on: 8/31/16 Denied on: 1/1

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

By: Thomas L. Kelley
Zoning Administrator

* NO MORE than 5 appointments per day.

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 4.9) from the Zoning Regulations. Your application will be judged on this information can criteria plus any additional information required by the Zoning Administrator.

Date: 7/22/2016 Zoning District: R2
Landowner's Name: ROSALIE + STEVE SCHNEIDER
Applicant's Name: ROSALIE SCHNEIDER
Address of Home Occupation: 7 CEMETERY ROAD, ESSEX
Name of Home Occupation: PSYCHOTHERAPY / COUNSELING

I. TYPE OF USE

- 1. Nature of the Home Occupation PSYCHOTHERAPY, COUNSELING
2. Does the Home Occupation include retail sales? [] Y [X] N
As the primary use? [] Y [X] N Secondary to other uses(s)? [X] Y [] N
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: Road Frontage:
3. Number of buildings on property: TWO - HOUSE + SHED
Total finished square footage of home: 2000 SQ. FEET
4. Building(s) to be used: Existing? YES New? NO
5. Square footage of Home Occupation:
Inside House: 400 SQ FT Inside Other Bldgs: Outside:
Offices: Working Area: Storage: NONE

III. METHOD OF OPERATION

- 1. Number of employees: Family ONE-MYSELF Non-family _____
- 2. Hours of operation: 10 AM-7 PM Days of Week: 6

IV. TRAFFIC AND PARKING

MON-SATURDAY

- 1. Projected traffic _____ Cars per day 4-5 Trucks per day _____
- 2. Parking: Applicant's vehicle(s) stored outside: _____

V. SIGN

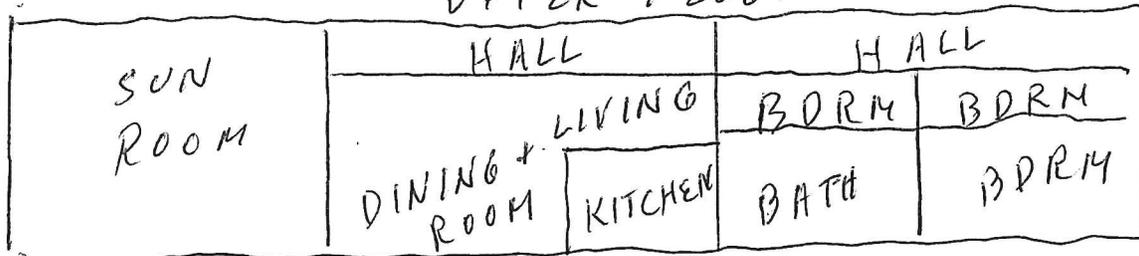
- 1. Is a sign being requested? Y N
 If so, maximum permitted size is 3 square feet. Size: UNSURE

VII. MAP

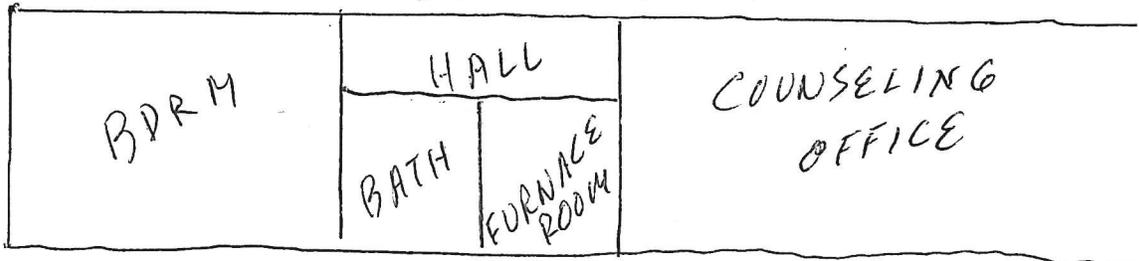
- 1. Neat ruler drawing showing size of building and floor plan indicating area to be used.
- 2. Submit photographs of all sides of the building.
- 3. Submit a brief narrative describing your business.

I am a registered mental health counselor who provides therapy to individuals couples and families. there will be no more than 5 visits per day. *see attached narrative*

UPPER FLOOR



LOWER FLOOR



Attachment
to Permit

- Home
- Profile
- Account
- Community
- Help



Rosalie Schneider

Pre-Licensed Professional, MS

About

I believe anyone can obtain the help they need, whether it be for depression, dealing with trauma/PTSD, loss and grief, parenting, couple and family struggles, career and life changes, divorce, or the difficult challenges of everyday life. I focus on the client's strengths to increased awareness of untapped potential and positive capabilities, which we all possess.

I enjoy working with people of all ages, from children to seniors. I am interested in working to overcome trauma, especially resulting from early childhood experiences, whether sexual, emotional or physical abuse. I am also interested in examining adoption issues.

I believe firmly in ongoing collaboration between therapist and client. Change comes from within a person, it's not imposed from outside. By in-depth and honest examination of the person's past experiences and feelings, profound change can and does occur. I use an eclectic mix of theories to help achieve that change.

Call or [Email](#) for a **free consultation** now - **(802) 461-4236**

Qualifications

Supervisor: Jay Gleason
Supervisor License: 068-000566

verified by Psychology Today

(802) 461-4236

Location

Partners for Change
 N12 Stonehedge Drive
 South Burlington, Vermont 05403
 (802) 461-4236

[Email Me](#)

Specialties

Issues:

- Academic Underachievement
- Antisocial Personality
- Bipolar Disorder
- Depression
- Domestic Abuse
- Eating Disorders
- Family Conflict
- Life Coaching
- Relationship Issues
- Sexual Abuse
- Trauma and PTSD
- Adoption
- Behavioral Issues
- Child or Adolescent
- Divorce
- Domestic Violence
- Emotional Disturbance
- Grief
- Parenting
- Self Esteem
- Teen Violence

Mental Health:

- Dissociative
- Elderly Persons