

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

Appeal Period Expired: 9,18,08 Permit # 2008-120-H
Date: 9/2/08 Application Fee: \$~~83~~ 93 Pd Sept 12/08
Applicant's Name and Address: Bonne Benson
8 Logwood Circle Essex Jct, VT 05452
Type of Home Occupation: Swim lessons
Phone Numbers: Home: 878-7714 Work: _____ Cell: 238-0243
Zoning District: E-2 Tax Map, Parcel, & Lot: 2 - 006 001 081

The undersigned hereby applies for permission to operate a Home Occupation pursuant to Section ~~25.11~~ 4.9(B) of the Zoning Regulations.

Applicant's Signature Bonne Benson

Approved on: 9/3/08 Denied on: / /

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

By: Sharon L. Kelley
Zoning Administrator

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.

The applicant confirms that her hours of operation will fluctuate between 8am-6pm, however, she will have no more than 5 customer visits per day. Note that depending on the customer, a lesson could range from 45 minutes to 2 hours. The applicant will schedule her appointments so that they do not overlap each other.

The applicant was instructed to keep a log of the pool use in order to determine her home occupation use of 5 visits per day versus her private use of the pool.

The applicant was instructed to apply for a conditional use approval through the Zoning Board of Adjustment if she finds that she needs to exceed 5 customer visits per day.

Sharon L. Kelley 3

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: 8 / 27 / 08 Zoning District: _____
 Landowner's Name: Mark and Bonnie Benson
 Applicant's Name: Bonnie Benson
 Address of Home Occupation: 8 Logwood Circle Essex Jct, VT 05452
 Name of Home Occupation: Working Waters LLC

I. TYPE OF USE

1. Nature of the Home Occupation private swim instruction
2. Does the Home Occupation include retail sales? Y N
 As the primary use? Y N Secondary to other uses(s)? Y N
 Will the Home Occupation produce any objectionable noise, vibration, smoke, dust,
 3. 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? Y N
2. Lot size: .72 acres Road Frontage: 75 feet
3. Number of buildings on property: one
 Total finished square footage of home: 2104
4. Building(s) to be used: Existing? _____ New? new (add on to home)
5. Square footage of Home Occupation:

	Inside House:	Inside Other Bldgs:	Outside:
Offices:	<u>16 x 25</u>	_____	_____
Working Area:	<u>25 x 40</u>	_____	_____
Storage:	_____	_____	_____

III. METHOD OF OPERATION

1. Number of employees: Family _____ Non-family _____
2. Hours of operation: 8-6 pm * Days of Week: ~~Mon~~ M, Tues, Thurs, Fri
Sat

IV. TRAFFIC AND PARKING

1. Projected traffic _____ Cars per day 5 Trucks per day _____
2. Parking: Applicant's vehicle(s) stored outside: no, only Saturdays one car in driveway

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.

* I will operate between 8am and 6pm. I will not be working all of those hours. Every day will most likely have a different schedule due to clients being in school.

I am also a personal care attendant for several families that have children with disabilities. Those children may come to swim with me as guests at my indoor pool facility. There will be no exchange of money for services.

I also have 3 sons. Two in college and one in High School. They will have friends over to swim at different times. My plan is to log all vehicles that come to my home during the above hours and indicate whether they are guests or customers.

If you need any other documentation I will be happy to supply it.

Thank you for considering my business

Bonnie Benson

Working Waters LLC is a small business that offers private swim lessons for people of all ages and abilities. Working Waters LLC provides a Certified American Red Cross swim instructor that will teach people to swim, teach safety in and around the water and create a recreational outlet.

Floor Plan

