

Appeal Period Expires ___/___/___

Zoning District _____

Town of Essex, Vermont
PERMITTED HOME
OCCUPATION APPLICATION

Application Date ___/___/___

Permit Number _____

In accordance with the Act [§ 4412(4)], no provisions of these Regulations shall infringe upon the right of any resident to use a minor portion of a dwelling for an occupation which is customary in residential areas and which does not have an undue adverse effect upon the character of the residential area in which the dwelling is located.

Home occupations which meet the following requirements are allowed as accessory uses in all districts where residential uses are allowed. A proposed home occupation shall be considered a permitted use and approval shall be granted by the Zoning Administrator if, in his/her judgment, the following criteria are met:

- (1) No delivery of equipment or merchandise other than an occasional UPS – type vehicle and/or occupant’s personal vehicle.
- (2) Only one business vehicle owned by the resident may be parked at the dwelling. The business vehicle parked at the dwelling shall not exceed a one-ton capacity and shall be parked in an adequate off-street parking area.
- (3) No more than five (5) customer visits per day at the premises shall be allowed.
- (4) The owner of the business shall be a resident on the premise.

The Applicant confirms that they meet the above 4 requirements. (initial here) _____

Parcel Account Number (Map-Parcel-Lot) 2- ___ - ___ - ___ Application Fee \$100 _____

Property Address: _____

Property Owner: _____

Owner Phone: _____ Email: _____

Applicant’s Name: _____

Applicant’s Phone: _____ Email: _____

Please Answer the following questions:

1. Describe in detail the operation (including days/hours of operation, number of employees, etc.):

2. Does the Home Occupation include retail sales? ___ Yes ___ No (If yes, please describe above.)

3. Will the Home Occupation produce and objectionable noise, vibration, smoke, dust, electrical disturbance, odors, heat, or glare? If yes, please specify:

USE OF PROPERTY

- 1. Is the primary use of the property as a residence for the applicant? Yes No
- 2. Number of buildings on the property: _____ Building(s) to be used: Existing New
Please provide a diagram
- 3. Total finished square footage of home or building to be used: _____
- 5. Square footage of Home Occupation:

	Inside House:	Inside Other Buildings:	Outside:
Offices:	_____	_____	_____
Working Area:	_____	_____	_____
Storage:	_____	_____	_____

METHOD OF OPERATION

- 1. Number of Employees: _____ Family _____ Non-Family
- 2. Hours of Operation: _____ Days of Week: _____

TRAFFIC AND PARKING

- 1. Projected Traffic _____ Cars per day _____ Deliveries per day _____
- 2. Parking: Applicant's vehicle(s) stored outside: _____

Is a sign being requested? Yes No If yes, maximum permitted size is 3 square feet. Sign size: _____

SITE PLAN

- 1. Neat ruler drawing of the property including all structures and parking area, include floor plan for business.
- 2. Submit photographs of all sides of the building.

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

Applicant's Signature: _____

Approved **Denied** **Date:** ____ / ____ / ____

(See attached for conditions of approval or reason for denial.)

By: _____, **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.