

Fee paid \$ \_\_\_\_\_ **ZONING PERMIT APPLICATION** Permit # \_\_\_\_\_  
Recording paid \$10.00 Town of Charlotte, P.O. Box 119, Charlotte, VT 05445-0119

Owner(s) Lee & Deborah Minkler Phone (h) 425-2889 Application # \_\_\_\_\_  
Phone (w) 2888

Address 1158 Roscoe Rd

Applicant Same Phone (h) \_\_\_\_\_  
Phone (w) \_\_\_\_\_

Address \_\_\_\_\_

Note: An applicant who is acting as agent for the owner must submit a letter of authorization from the owner.

Property address 1158 Roscoe Rd Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Parcel ID # 00031-1158 Zoning district \_\_\_\_\_ Acres 13+

For office use only

Any conditions (subdivision, site plan, covenant, or conditional use approval) that apply to this property? Yes  No

Summarize those conditions: Access Easements

Describe below the improvements to be made and their intended use:  
Home Occupation in Existing Building  
Design, assemble and distribute scales

Details provided on Attachments # \_\_\_\_\_ # \_\_\_\_\_ # \_\_\_\_\_ # \_\_\_\_\_ # \_\_\_\_\_ # \_\_\_\_\_ dated 11/1

No. of sq. ft. added to building footprint NA No. of sq. ft. of usable space added within building footprint NA

No. of bedrooms NA baths NA before construction. No. of bedrooms NA baths NA after construction.

\*Attach to this sheet 1) a plot plan, 2) a floor plan, and 3) elevation drawings, drawn to scale, with North →, showing:

\*Plan size submissions to be 8 1/2 X 11 or 11 X 17

- |  |   |
|--|---|
| <input type="checkbox"/> Road frontage and rear width and side lines             | <input type="checkbox"/> Building dimensions, including heights     |
| <input type="checkbox"/> All existing and proposed building footprints           | <input type="checkbox"/> Utilities, easements, and right-of-ways    |
| <input type="checkbox"/> Building envelope, when applicable                      | <input type="checkbox"/> Water well(s) and septic system(s)         |
| <input type="checkbox"/> Setback distances to front, rear, & side property lines | <input type="checkbox"/> Bodies of water, including unnamed streams |

*This permit is subject to appeal of the Zoning Administrator's decision by an interested party within fifteen (15) days of the date of issue and shall NOT become effective UNTIL the appeal period has expired or, if appealed, until final adjudication of said appeal.*

I/we will adhere to the zoning and sewage regulations of the Town of Charlotte. I/we agree to not to use these improvements until a certificate of occupancy has been issued. I/we agree to allow authorized Town officials access to the property to verify compliance with the terms and conditions of this permit, upon reasonable notice.

I/we acknowledge that my/our project may require a construction permit from the Vermont Department of Labor and Industry, and other State permits. I/we agree to contact the Department of Labor and Industry and the Regional Environmental Office to obtain any required permits prior to any work being done.

Signature(s) of applicants Lee Minkler Deborah Minkler Date 9/15/17

For use by Zoning Administrator/Sewage Officer

Date application received   /  /   Date permit issued   /  /   Date permit effective   /  /  

Permit # \_\_\_\_\_ Certificate of Occupancy required? Yes  No

Application Approved \_\_\_\_\_ Denied \_\_\_\_\_

Signature of Zoning Administrator/Sewage Officer

## Home Occupation I, II & III – Questionnaire

- 1) Describe the nature of the Home Occupation and when it was started.
  - a. Please provide copies of advertisements or websites.  
*Logical Machines*
- 2) What is the address of the lot on which the Home Occupation is located?
- 3) Does the Home Occupation have a zoning permit?
  - a. Please provide a copy.
- 4) How many structures/buildings are on the lot?
  - a. Please describe the use of each structure
  - b. Please describe and show them on a plan.
  - c. Does each structure have a zoning permit and/or certificate of occupancy
    - i. Please provide copies of these permits and/or certificates
- 5) Does the Home Occupation occur within a residential dwelling?  
*Ne*
  - a. If so where does it occur in the dwelling  
*Accessory Building*
- 6) Is the residential dwelling served by a Water and Waste Water System
  - a. If so please describe the water and waste water systems *SFD*
  - b. Please provide all permits for the water and waste water systems.  
*Uses Bathroom in Dorell. N ↓*
- 7) Does the Home Occupation occur within an accessory structure to the residential dwelling? *Yes*
  - a. If so please describe the accessory structure
    - i. Height
    - ii. Square footage *24 x 30*
    - iii. Floors *2*

8) Does the accessory structure have water and waste water systems? *NO*

- i. If so, please describe the water and waste water systems
- ii. Please provide all permits for the water and waste water systems

9) Does the accessory structure have a zoning permit and Certificate of Occupancy? *Yes 2P*

- i. If so, please provide copies

10) How many business- related vehicle trips per day is generated by the Home Occupation ?

- a. Please describe the daily number of trips for each type of vehicle

11) How many occupants of the residence does the Home Occupation employ? *1* *32' Ft Box Truck*

- a. Please identify the residents  
*LCC Minkler*

12) How many nonresident employees of the Home Occupation are on-site at anytime? *4*

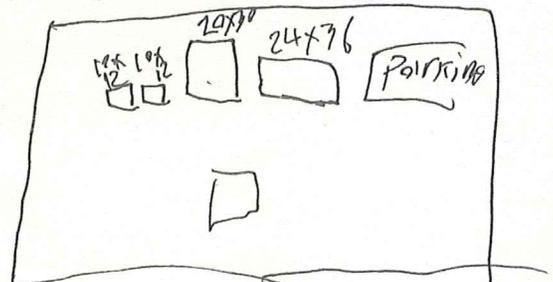
- a. Please identify the non-resident employees

13) Does the Home Occupation generate or handle Hazardous Materials? *NO*

- a. If so please identify these materials and where they are stored.

14) Where is parking for the Home Occupation employees?

- a. Please provide a diagram of the parking



- 15) Is there a sign for the Home Occupation? *✓<sup>a</sup>*
- a. Please provide a picture of the sign and its location
  - b. If there is no sign, is a sign planned? *✓<sup>o</sup>*
    - i. If so, please provided an example of the proposed sign and its location
- 16) Does the Home Occupation meet the standards in the attached Performance Standards Questionnaire ?
- 17) **FOR HOME OCCUPATION III ONLY**  
Is there outdoor storage for the Home Occupation ?
  - a. If so, please show the storage area on a plan.

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9.25.17