

GEORGIA VERMONT

HOME OCCUPATION PERMIT

APPLICANT INFORMATION (complete all) PERMIT # HO- 001-24

Applicant(s): Jennifer Rocheteau Owner(s): _____
(If other than Applicant)

Address: 3193 Oakland Station Rd Address: _____
Georgia, VT 05478

Zip Code 05478 Zip Code _____

Telephone _____ Telephone: _____



PROPERTY OWNER'S AUTHORIZATION

***Fill out only if Applicant is other than owner**

The undersigned property owner hereby certifies that the information submitted in this application regarding the property is true, accurate and complete and that the Applicant has full authority to request approval for the proposed use of the property.

Date _____ Owner's Signature _____

Property Identification:

Location of Property (E911 Address): 3193 Oakland Station Rd
Parcel ID No.: 110900000 Zoning District: AR-1 Lot Size: 6.59 acres

Describe the proposed Home Occupation: Dog grooming

1. Will the Home Occupation be carried on by members of the family living on the premises? Yes ☒ No ☐
2. Will there be any other non-family members employed by the Home Occupation?
Yes ☐ No ☒
If yes, please indicate number of individuals and number of hours worked per week: _____

3. Proposed hours of operation: 8AM - 3PM
4. Proposed days of the week: Monday - Saturday

47 Town Common Road North. • St. Albans, VT 05478

• Phone: 802-524-3524 • Fax: 802-524-3543 • website: townofgeorgia.com

5. Structure to be used for Home Occupation (residence or accessory): Garage
6. Total square footage of the structure proposed for Home Occupation: 320
7. Total percentage of floor space that the Home Occupation will utilize: 12%
(Please note: no more than 50% of the total area of the structure to be used for the Home Occupation is allowed)
8. Will there be a sign advertising the Home Occupation? Yes ☒ No ☐
(Please note: If yes, a separate Sign Permit is required.)
9. Will there be any exterior displays or other advertising material (other than a sign)?
Yes ☐ No ☒
10. Will there be any exterior storage of materials? If yes, please describe nature of materials, location on property, and proposed screening: NO
11. Please describe traffic expected to be generated (customers, deliveries, employee, etc.) because of the Home Occupation, including estimated average number of trips per day:
5-6 Customers Per day
12. Please describe proposed parking, including number of spaces and proposed location:
Parking in my driveway, 1 Space. People come drop off dog then leave and pick up later.
13. Please submit a drawing on the page provided showing the lot outline; existing structures and distances to property lines; existing and proposed driveway and parking, including number of spaces, location, and distance to property lines; proposed area(s) of exterior storage of materials including existing and/or proposed screening and distance to property lines; and proposed location of sign (if any).

AFFIRMATION:

By signature below, applicant(s) hereby certifies that the information submitted in this application is true, accurate, and complete. Applicant(s) further certifies that the proposed Home Occupation will not generate excessive noise, smoke, vibration, dust, glare, odors, electrical interference, or heat that is detectable at the property boundaries and that there will be no risk to public health from the Home Occupation such as toxic emissions or on-site disposal of hazardous wastes.

Signature of Applicant: _____

Signature of Co-Applicant: _____

Date: 2/24/24

Date: _____

Certificate of Occupancy: The Town of Georgia Development Regulations provide, in part, as follows: It shall be unlawful to use or occupy or permit the use of occupancy of any or structure or part thereof which requires a zoning permit under these Regulations until a Certificate of Occupancy is issued by the Administrative Officer. An application for a Certificate of Occupancy is included herein.

PERMIT # HO- 001-24

DECISION/ACTION TAKEN (TOWN USE ONLY)

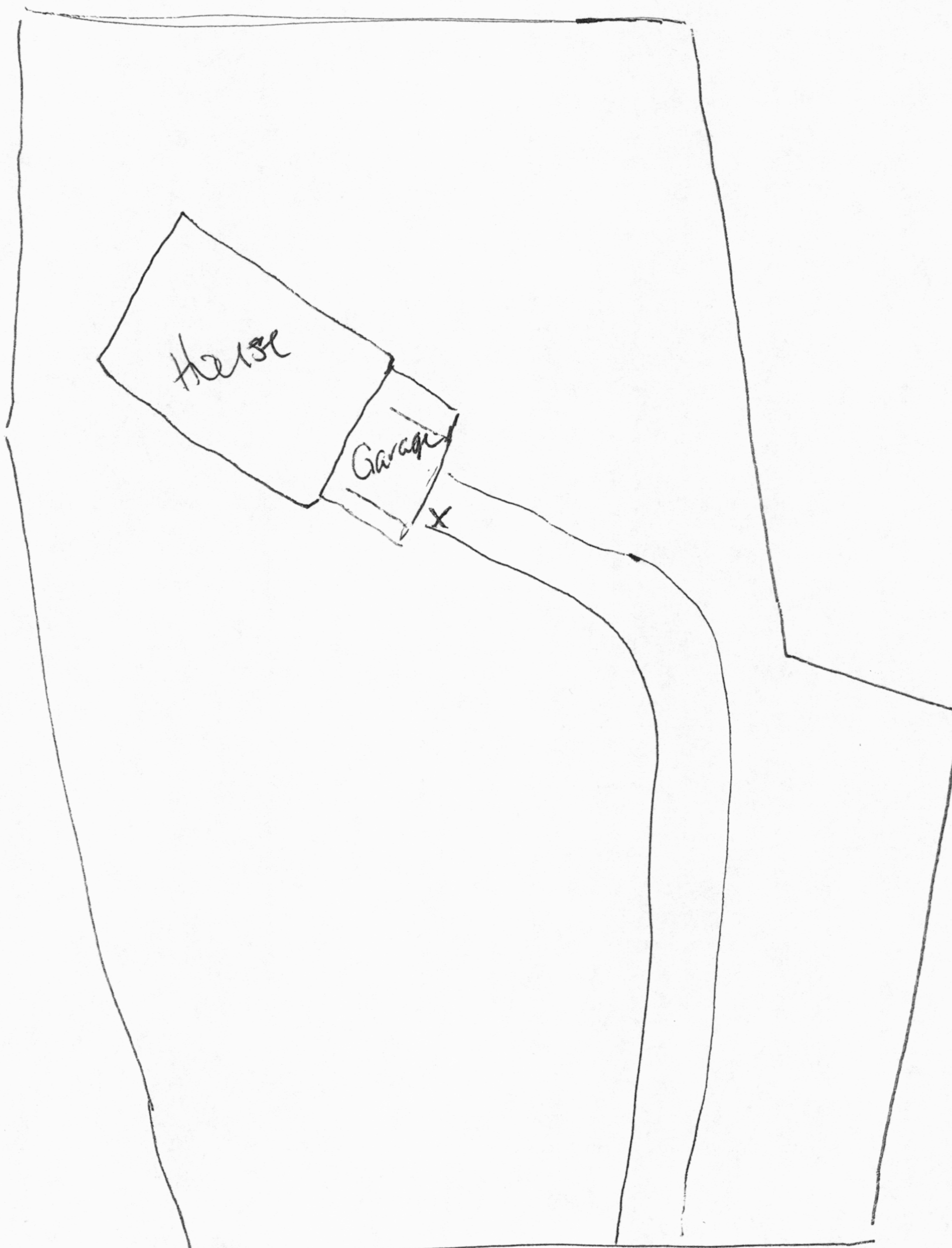
Date Received	3/11/24
Zoning Fee Paid	100
Recording Fee Paid	45
Check #	1006
Approved / Denied	approved
Returned (Incomplete)	
Date of Decision	3/11/24
Permit Valid Starting	3/17/24

Signed

Douglas Bergstrom
Zoning Administrator

Permit may be appealed within 15 days of issuance per Title 24 VSA Ch.117 Section 4465.

This permit **expires one year from date of issue** and may be extended one additional year upon application to the Zoning Administrator. If this permit is not utilized within one year, or not extended for the same proposal, it will become null and void.



x = Parking Area

Garage is grooming area