



RESIDENTIAL ZONING PERMIT FOR A HOME OCCUPATION

Town Hall, 415 Route 169, Woodstock, CT 06281 860.928.0208

Property Location: 49 Lebanon Hill Rd.

RECEIVED

Assessor's Map _____ Block _____ Lot(s) _____

Owner's Name: Daniel Lapierre

MAR 27 2024

Mailing Address: 49 Lebanon Hill Rd.

TOWN OF WOODSTOCK LAND USE DEPT.

Telephone: (617) 201-0770 Email Address: danlapierre@gmail.com

Describe the proposed activity as completely as possible: danlaps81@gmail.com

Small office space for small electrical company DB.A. Sale Proprietor. Not storing any equipment at the home and no employees. Doing paperwork and phone calls related to business at home.

- 1. Is the activity clearly incidental and secondary to the residential use of the premises? YES
2. Will the exterior residential character of the dwelling and accessory structures be changed? NO
3. Will the activity be conducted primarily by the resident occupant and not more than 3 non-resident employees? YES
4. Will you have any on street parking? NO
5. Will there be more than 4 parking spaces dedicated to the use of the activity? NO
6. Will the activity create noise? NO odor? NO traffic? NO
7. What % of the finished floor area will be utilized for the home occupation in the residence? 200 sq ft
8. Will any accessory building(s) be utilized for the occupation? NO

a. if yes, then what percentage of the finished floor area of the dwelling will be utilized for the home occupation in the accessory building(s)?

9. Will you be installing any new signs for the occupation? NO

Describe: _____

PAID

MAR 27 2024

TOWN OF WOODSTOCK LAND USE DEPT.

10. Will the home occupation be a service or sales of articles? Service X Sales _____

11. If articles for sale, then will they be produced in the home? Yes _____ No _____ N/A X

12. Will you be bringing in articles for sale that are not made in the home? Yes _____ No _____ N/A X

13. Will sales be made in person, on the internet, or by other methods? _____

14. Will service-related vehicles (not personal vehicles for the residence) be parked on the property and if so, then how many? Yes _____ # of vehicles _____ No X N/A _____

I agree that the above information is accurate, and I attest that I am the owner of and reside at the residence at which the home occupation will take place.

Owner's Name (Print): Daniel Lapierre

Owner's Signature: [Signature] Date: 03/26/2024

For Zoning Enforcement Officer Use:

I have inspected the premises of the proposed home occupation and agree that it qualifies as a home occupation.

Zoning Enforcement Officer (Print): _____

Zoning Enforcement Officer Signature: _____ Date: _____