

Washington Zoning Commission
COMPLETION REPORT – LIST OF ITEMS IN FILE
29 Wykeham Rd – Professional Office in R-1 Zone

Applicant: Zali Win, Property Owner

Date of Application Submission: 07-12-2023

Mailing Address of Property Owner: on record

n/a Name and contact information for authorized agent (if applicable)

n/a Agent Authorization Letter

n/a Mandatory Pre Application Form

√ Fee Due \$150 Special Permit, Check payable to Town of Washington

√ Proposed Use: General Home Occupation

√ Zoning Regulation Section(s): 4.4.15

Zoning District: R-1

√ Attached a written statement with a Description of the Proposed Use:

n/a For new buildings include

√ For new businesses

√ Site plan or survey map showing:

location of proposed or **existing** building: n/a

location of septic system

√ Distance to the proposed structure, parking spaces, etc.:

from each boundary line

from the septic system

√ Attach a floor plan: Please calculate total square footage and indicate on the plans

Also Required for **ALL** applications:

√ Health Dept. approval - signature of Health Department Agent/Dated

√ State Tax of \$60 to be included with fee - Check payable to Town of Washington

n/a Proof of Inland Wetlands Commission approval, if applicable/Dated_____

n/a Proof of Zoning Board of Appeals approval and filing on Land Records, if applicable

n/a Driveway sign-off from First Selectman, if applicable

Administrative Review/ZC Mtg – 07-24-23

LUA comments in Italics

SECTION 4.4 USES BY SPECIAL PERMIT

4.4.15 General Home Occupation

SECTION 12.6 HOME OCCUPATION

12.6.1.C General Home Occupation – Standards & Criteria – *addressed in Applicant Description*

1. Applicant addressed with Exhibit 1 & 2. The total floor area occupied by the General Home Occupation use - ***complies***

2. Applicant submitted Exhibit 1 Floor Plans including the floor area (in square feet) devoted to the GH0 use - ***complies***

3. The General Home Occupation use may occupy an accessory building(s) - ***not applicable***

4. The appearance of the lot and structures on the lot shall not be altered in a manner – ***there will be no change in the footprint of the house - complies***

5. No more than two (2) non-resident persons shall work on the residential lot in association with the General Home Occupation use, - ***applicant will be the only therapist - complies***

6. Off street parking shall be provided to accommodate the parking needs of the General Home Occupation. – ***Applicant shows adequate parking on Exhibit 3 – Parking Plan - complies***

7. The use may increase vehicular traffic flow by no more than two vehicles at a time... - **Applicant confirmed - complies**

8. Applicant confirmed there shall be no sales of merchandise – **Applicant confirmed – complies**

9. Applicant confirmed that they will reside on the premises and visitors will come by appointment only – **complies,**

10, 11, & 12. Confirmed by applicant that these are **not applicable** to the Therapist General Home Occupation

12.6.2 The following requirements shall be met with regard to all the foregoing home occupations:

A. The use is clearly secondary to the use of the premises for dwelling purposes, **-confirmed by applicant**

B. The use does not change the residential character of the dwelling in any visible manner, **-confirmed by applicant**

C. The use does not create objectionable traffic, noise, odor, vibrations, obnoxious or unsightly conditions noticeable from off the premises, **-confirmed by applicant**

D. The use does not create interference with radio and television reception in the vicinity, **-confirmed by applicant**

E. The use does not create a health or safety hazard, **-confirmed by applicant**

F. No more than two persons not residing on the premises shall be employed on the premises, **-confirmed by applicant**

G. No merchandise transactions or retail sales are conducted on the premises...**-confirmed by applicant**

H. There will be no storage, stockpiling**-confirmed by applicant**

I. No more than one commercial type vehicle shall be used.....**-confirmed by applicant**

J. Application for a Special Permit shall be on a form provided by the commission, and shall include...
-confirmed by applicant

SECTION 13 - SPECIAL PERMITS

13.1.C Special Permit Standards.

The Applicant has shown that the proposed use complies with the Special Permit Standards or they are not applicable to having a home based therapist office.

The Zoning Commission may schedule the public hearing.

List of Items in the File

1. 2023-7-12 Submitted application
2. 2023-6-21 Health Approval
3. Undated Floor Plans
4. Undated Project Description
5. Undated Site and Parking Plan
6. 2022-1 Deed and Schedule A
7. 2023-7-21 Administrative Report