

Town of Old ORCHARD BEACH

Current Planning Services:

**ADMINISTRATIVE SITE PLAN
HOME OCCUPATION
Sec. 78-215**

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Application Fee is \$100.00

Date Received:

Application Fee PAID:

Application and Submittal Requirements

This application and all accompanying submissions shall conform to the applicable provisions of the Old Orchard Beach Zoning Ordinance.

Parcel No.

M:

B:

L:

Zoning Dist.:

Project Name:

**Project Address
or Location:**

Record Owner:

E-mail:

Mailing Address:

Phone:

Fax:

***Applicant/Agent:**

E-mail:

Mailing Address:

Phone:

Fax:

**If Applicant IS NOT the record owner, attach evidence of the applicant's interest in the property.*

Existing Use of Property:

*If approved, this approval expires twelve (12) months from date of approval.
Building permits must be issued within six (6) months of approval.*

No application shall be accepted by OOB Town Staff without all information in the above section and without all items marked in the following pages.

OOB Planning Department

One Portland Avenue, Old Orchard Beach, ME. 04064 Phone: 207 934 5714 x238 Fax: 207 934 5911

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Application and Submittal Requirements

1. DESCRIBE THE PROPOSED HOME OCCUPATION:

Note NA in any section that is NOT APPLICABLE. Check each box when completed.

2. ATTACH A COPY OF THE PROPERTY DEED.

3. SIZE OF PROPERTY: _____ SF

4. IDENTIFY ANY AND ALL **EASEMENTS** ON THE PROPERTY. ATTACH COPIES OF EASEMENT DEEDS IF APPLICABLE.

5. FLOOR AREA

Existing Structure _____ SF

Proposed Structure(s) _____ SF

Addition(s) _____ SF

6. BUILDING:

Height: existing _____ft

proposed _____ft

Number of Stories: existing _____

proposed _____

Coverage: existing _____%

proposed _____%

Building Coverage is the total SF of all buildings and structures (including swimming pools), porches, decks, sheds, roof overhangs, etc. divided by the total of the gross property area.

7. LOT COVERAGE:

Existing : _____SF _____%

Proposed: _____SF _____%

Lot coverage is the total of building coverage plus all other impervious surfaces including, but not limited to, walkways, sidewalks, parking lots, driveways, etc. divided by the gross lot area.

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8. Is any part of this property a historic or important natural site, or adjacent to such site?

Yes _____ No _____, If Yes, EXPLAIN:

9. UTILITIES:

Sewer: Public Sewer

Existing Septic System

Water: Private

On-site Well

Public (Name of Provider): _____

Electrical/Telephone/Public Cable:

Underground

Overhead: Phase ___ 1; ___ 2; ___ 3

Other Utilities:

Natural Gas

Propane

10. TRASH PICKUP:

Private How often per week? _____

Public How often per week? _____

Other How often per week? _____

11. SITE LIGHTING

Proposed Fixtures _____

Location _____

Lamp Wattage _____

*Attach catalog cut sheets of luminaries and photometric data from manufacturer(s).
Show ALL existing and proposed lighting on the site plan.*

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Application and Submittal Requirements

12. WASTE, EMISSIONS, NOISE and MATERIAL'S STORAGE:

- a. Will the proposed new use or the expanded use generate waste and/or emissions such as grease, lubricants, odors or hazardous materials?
- b. Will hazardous materials such as inks, dyes, solvents, lubricants and petroleum products be stored on-site?

Describe storage method(s):

Describe the off-premises noise the proposed project will generate:

(Attach a separate sheet if necessary.)

13. OPERATION:

Days of Operation: _____

Hours of Operation: _____

14. TRIP GENERATION:

a. Estimated number of vehicle trips entering and leaving the site on a daily basis.

b. Estimated number of vehicles entering and leaving the site during the busiest
A.M. hours: _____ (Busiest A.M. hours fall between _____ A.M and _____ A.M.)

c. Estimated number of vehicles entering and leaving the site during the busiest
P.M. hours: _____ (Busiest P.M. hours fall between _____ P.M. and _____ P.M.)

d. Estimated number of deliveries: (products, supplies, etc.)

Per day: _____

Per week: _____

Per month: _____

Type/size of delivery vehicle: _____

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Application and Submittal Requirements

15. PARKING:

- a. Number of **existing** parking spaces: _____
- b. Number of spaces **required** for proposed use: _____
- c. Number of **proposed** parking spaces: _____
- d. Size of spaces: _____ ft X _____ ft

Submit 4 copies of Application, Checklists, Plans, etc. to OOB Planning Department by the submittal deadline for review. See Page 6 for additional information and requirements.

18.

Prior to the issuance of building permits, certificates of occupancy or commencement of the approved activity, the applicant shall submit full executed performance assurances (if required), pursuant to OOB Zoning Ordinance Section 78-217 to the OOB Planning Department.

19. ATTACH A CHECK PAYABLE TO THE TOWN OF OLD ORCHARD BEACH FOR APPLICATION FEE.

The Undersigned hereby makes application to the Town of Old Orchard Beach for approval of the attached plans and declares the foregoing document to be true and accurate to the best of his/her knowledge.

Owner, Applicant, or Agent

Date

OOB Planning Department

One Portland Avenue, Old Orchard Beach, ME. 04064 Phone: 207 934 5714 x238 Fax: 207 934 5911



***Conditions for Home Occupation
Sec. 78-1267***

The purpose of the Home Occupation provision is to permit the conduct of only those businesses that are reasonably compatible with the residential districts in which they are located. Home Occupations shall comply with the following conditions:

1. The occupation or profession shall be carried on wholly within the principal single-family detached dwelling unit or owner-occupied two-family dwelling or within a building or other structure accessory thereto.
2. The occupation or profession shall be carried on by household members occupying the dwelling unit and one non-resident employee.
3. There shall be no exterior display, no exterior sign (except as expressly permitted by Section 5.4 of this ordinance), no exterior storage of materials and no other exterior indication of the home occupation or variation from the residential character of the principal building.
4. No nuisance shall be generated, including but not necessarily limited to, offensive noise, vibration, smoke, dusk, odors, heat, glare, traffic or parking
5. The traffic generated by such home occupation shall not increase the volume of traffic so as to create a traffic hazard or disturb the residential character of the immediate neighborhood. In addition to the off-street parking provided to meet the normal requirements of the residential use, adequate off-street parking shall be provided for the vehicles of the users of the home occupation. No more than two parking spaces serving the home occupation shall be permitted. Such off-street parking shall not be located within any required front yard areas and shall be screened from abutting properties.
6. No retail sales shall be permitted, except those sales which are incidental to the services provided by the home occupation.
7. The home occupation may utilize: **a.** Not more than 20% of the dwelling unit floor area, provided that for the purposes of this calculation, unfinished basement and attic spaces are not included; **b.** Unfinished attic and basement spaces; **c.** One accessory structure. The floor area utilized in the accessory structure shall not exceed 50% of the total floor area of the dwelling unit as previously calculated.
8. There shall be no change in the outside appearance of the building or premises, or other visible evidence of the conduct of such home occupation.
9. There shall be no alteration to the character or usefulness of the dwelling unit or accessory structure for normal residential purposes.
10. A single sign identifying the name, address, and profession of a permitted Home Occupation or a lawfully existing, non-conforming Home Occupation, is permitted provided such sign is non-illuminated and does not exceed two square feet. Free standing signs shall not exceed six feet in height and shall be located on the principal property. Wall mounted signs shall be located on the principal building and shall not extend beyond the first story.
11. The following uses **shall not be operated as home occupations:**
 - a. Facilities for the repair of motor vehicles
 - b. Automobile towing services.

Administrative Site Plan Review Application Requirements: Section 12.5.1

Four (4) copies of application and all relevant submissions, including (but may not be limited to):

- Proof of right, title and interest in the subject property
- Scaled site plan showing existing and proposed site features
- Stormwater and soil erosion control plan, *if applicable*
- Scaled building elevations and proposed sign layouts, *if applicable*
- Property boundary and/or topographic survey, *if applicable*
- Any other information deemed necessary by the Town Planner to make a reasonable and informed ruling on the project

Various submission requirements may be waived in the event it is determined that the nature of the proposed activity and/or the character of the property does not warrant these submissions

**ASSESSOR'S
CERTIFICATION for
MAP BLOCK and LOT**

The following certification of the correct Map Block and Lot Number(s) of the subject property must be obtained from the Assessing Office and must accompany all applications submitted to the Planning and Code Enforcement Departments.

NO APPLICATION will be deemed complete without this certification.

PROJECT NAME: _____

PROJECT APPLICANT: _____

Application Type (Check appropriate boxes)

- | | | |
|--|---|---|
| <input type="checkbox"/> Site Plan | <input type="checkbox"/> Design Review | <input type="checkbox"/> Subdivision |
| <input type="checkbox"/> Variance | <input type="checkbox"/> Miscellaneous Appeal | <input type="checkbox"/> Amend to Subdivision |
| <input type="checkbox"/> Sign Permit | <input type="checkbox"/> Street Opening | <input type="checkbox"/> Sewer Connection |
| <input type="checkbox"/> Dumpster Permit | <input type="checkbox"/> Building Permit | <input type="checkbox"/> Other |

Property owned by _____ and located at
owner's name

_____ is identified on the
Street Address

**Old Orchard Beach Assessor's Maps and within the Town Assessing
Records as having the following Map, Block and Lot number:**

MAP _____ BLOCK _____ LOT _____

Date

Assessing Official

OOB Planning Department