



LYNDEBOROUGH PLANNING BOARD

9 Citizens' Hall Road, Lyndeborough, NH 03082

Tel: (603) 654-5955

HOME BUSINESS APPLICATION

Date: _____

Name: _____ Telephone _____ e-mail _____

Address of Home Business _____ Map _____ Lot _____

Property Owner Information (if other than applicant)

Owner: _____ Telephone _____

Address: _____

Description of Home Business: _____

HOME BUSINESS. The Town of Lyndeborough encourages the establishment of home businesses that are compatible with the residential character of the neighborhood. A home business may serve as an incubator to allow businesses to start up. However, a home occupation shall be incidental to the use of the site for residential purposes.

1200.00 Village, Rural Lands One, Two and Three districts

Is the home business incidental and secondary to the use of the dwelling unit as a residence? Yes No

Is the home business operated in the residence or in an accessory structure? Yes No

Will the home business occupy less than one third (1/3) of the floor area in the residence? Yes No

Will the home business be carried on exclusively by the resident owner, resident members of the owner's family, a resident tenant, or resident members of the tenant's family? Yes No

Will more than two non-resident employees be on the premises at one time? Yes No

Will additions or changes be made to the residence? Yes No

Will noise, vibration, dust, smoke, electrical disturbances, odors, heat, glare, visual disharmony or other emissions be produced? Yes No

Will hazardous materials be produced or stored at the site of the home business? Yes No

Will there be an exterior display or storage of materials and equipment? Yes No

Will the home business generate additional traffic in the neighborhood? Yes No

Is sufficient off-street parking available for non-resident employees, customers and suppliers who may normally be expected to need parking spaces at one time? Yes No

Will the home business have a sign? Yes No

1200.01 Rural Lands One, Two and Three Districts.

Will the home business be evident from the road or other public right-of-way? Yes No

Will materials or equipment stored outside be visible from adjacent public rights-of-way and properties? Yes No

Will there be any retail sales not related to this home business? Yes No

Will separate structures be constructed or placed to accommodate the home business? Yes No

Owner / Applicant Certification

The signature(s) below certifies that the information provided on this form is in all respects true and accurate to the best of my (our) knowledge and belief. I agree that I have read the Zoning Ordinance requirements concerning Home Businesses, understand the described regulations and agree to abide by them. I also understand that should the Home Business change or become a nuisance, hazard or unreasonably interfere with the quiet enjoyment of other people’s premises, this Home Business Permit will be revoked.

Owner: _____ **Applicant:** _____

Planning Board Approval

Approved Denied Exempt *Note: Exemptions require a Home Business Exemption form be completed.*

Planning Board: _____ Date: _____

Comments: _____

