



Town of Newton, New Hampshire
CONDITIONAL USE PERMIT
HOME-BASED BUSINESS
WITHOUT RETAIL/CUSTOMER AREA

RECEIVED
APR 22 2024
BY: *JCI*

I herein make application to the Planning Board of the Town of Newton for a permit to operate a home-based business at the location listed below, as provided for in the Zoning Ordinances Section XII, "Home Occupations and Home-Based Businesses." This business will not be open to the public but is to supply a business address to qualify under NH RSA 349:5.

One home occupation / home-based business is allowed per property and is accessory to the residential use. There shall be no outdoor activity or use, including storage and parking of commercial vehicles or trailers exceeding 12,000 GVW.

DATE: 4-22-2024	PROPERTY LOCATION & ACREAGE: 29 Crane Crossing Rd. Newton NH	MBL#: 7-2-3
APPLICANT'S NAME: Nicholas Nieberle	MAILING ADDRESS: 29 Crane Crossing Rd. Newton NH 03858	PHONE: 978 479 0899
EMAIL ADDRESS: Nikbuilt@gmail.com		
BUSINESS NAME: Granite Home Solutions LLC	BUSINESS MAILING ADDRESS: 29 Crane Crossing Rd. Newton NH	BUS. PHONE: 9784790899
NATURE OF BUSINESS: remodeling and home repairs.	HOURS OF OPERATION: 7:30 am - 4:00 pm	# EMPLOYEES: 0

Fees for Home-Based Business

Application Fee - \$ 100.00 ____
NPREA Fee - \$ 375.00 ____

Attachments:

Home Occupation Checklist ☒ 16- 11" X 17" Plans ☒
Abutter labels ☒ Letter of intent ____

ONLY FULLY COMPLETED APPLICATIONS WITH ALL REQUIRED ATTACHMENTS WILL BE FORWARDED TO THE PLANNING BOARD.

PLEASE REFER TO PROCEDURES SECTION OF THE NEWTON ORDINANCE MANUAL ONLINE FOR SUBMISSION REQUIREMENTS.

I declare that I am the applicant/owner of the property for which this application is made. I have read the provisions of the Newton Zoning Ordinances Section XII and the Newton Policies and Procedures Manual. I agree to comply with them, and to be subject to all their provisions. I hereby declare that this application is to bring my business into compliance with RSA 349:5 and will not have any public hours of access and any business will be conducted off-site from the above listed address. I declare that I understand that any permit issued under Section XII may not be transferred to another party.

I certify the above statements are true and accurate:

Nikbuilt

Signature of Applicant

4-22-2024

Date

Nikbuilt

Signature of Owner

4-22-2024

Date

CONDITIONAL USE PERMIT HOME-BASED BUSINESS CHECKLIST

<input checked="" type="checkbox"/>	1. A sketch of the property showing all buildings and structures has been provided.
<input checked="" type="checkbox"/>	2. There shall not be any outside display of the home-based business except the permitted 2 square foot sign.
<input checked="" type="checkbox"/>	3. No toxic, explosive, flammable, combustible, corrosive, etiologic, radiologic, or other restricted materials shall be stored onsite.
<input checked="" type="checkbox"/>	4. No more than two commercial vehicles shall be kept overnight at premises.
<input checked="" type="checkbox"/>	5. Home-based business shall be conducted by the resident of the premises.
<input checked="" type="checkbox"/>	6. No outside operations, storage or display of materials or goods shall take place.
<input checked="" type="checkbox"/>	7. Processes shall not be utilized which are hazardous to public health, welfare, or safety.
<input checked="" type="checkbox"/>	8. Business shall not emit smoke, dust, odor, noise, gas, fumes, or lights. Any refuse matter produced by the home-based business must not be disposed of in the town transfer station. Independent disposal shall be arranged for by the resident.
<input checked="" type="checkbox"/>	9. A copy of the property assessment card has been provided.
<input checked="" type="checkbox"/>	10. A description of the business has been provided.
<input checked="" type="checkbox"/>	11. No retail space will exist, nor will customers come to the premises.
<input checked="" type="checkbox"/>	12. Abutters labels have been provided.
<input checked="" type="checkbox"/>	13. Letter of Intent has been attached

By signing this application to the Planning Board, you give permission for the Newton Planning Board to conduct a site visit should one so be ascertained to be necessary. An appointment for any such site plan will be arranged with the property owner and/or tenant beforehand.

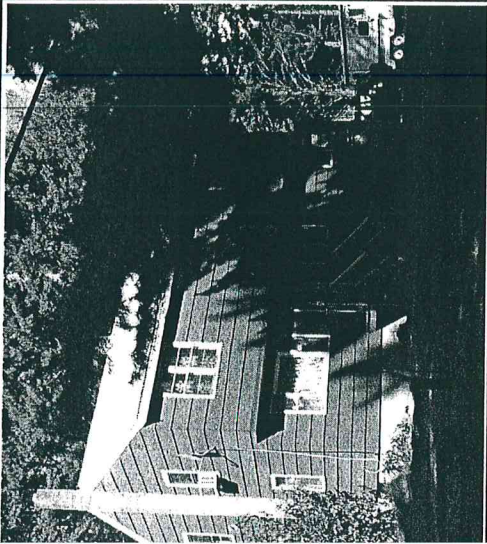
I certify the above statements are true and accurate:



Signature of Applicant

4.22.2024

Date



NIEBERLE, NICHOLAS H.
29 CRANE CROSSING ROAD
NEWTON, NH 03858

District Percentage

PERMITS

Date	Project Type	Notes
11/02/15	ADDITION	REMOVE ROOF FROM HOME AND ADD

BUILDING DETAILS

Model: 2.00 STORY GARRISON
Roof: GABLE HIP/ASPHALT
Ext: CLAPBOARD
Int: DRYWALL
Floor: HARDWOOD/LINOLEUM OR SIM
Heat: GAS/FA DUCTED
Bedrooms: 2 Baths: 2.0
Extra Kitchens:
Fireplaces:
Generators:
A/C: No
Quality: A1 AVG+10
Com. Wall:
Size Adj: 0.9880
Base Rate: RSA 95.00
Bldg. Rate: 1.0118
Sq. Foot Cost: \$ 96.12

BUILDING SUB AREA DETAILS

ID	Description	Area	Adj.	Effect.
UFF	UPPER FLR FIN	1008	1.00	1008
ENT	ENTRANCE	25	0.10	3
EPF	ENCLSD PORCH	110	0.70	77
FFF	FST FLR FIN	936	1.00	936
BMU	BSMNT	936	0.15	140
GLA:	1,944	3,015		2,164

2020 BASE YEAR BUILDING VALUATION

Market Cost New: \$ 208,004
Year Built: 1950
Condition For Age: GOOD 17 %
Physical:
Functional: RR TRACKS 5 %
Economic:
Temporary: 22 %
Building Value: \$ 162,200

Letter Of Intent

For

Granite Home Solutions(GHS)

29 Crane Crossing Rd Newton Nh.

GHS offers exceptional residential repairs and Home improvement services to Newton NH and the surrounding towns. Work is all performed on residential sites and not at 29 Crane Crossing rd. Newton N.H.


GHS parks the work vehicle on the premises when not in use.

GHS Has a small office at the above address where planning and bookkeeping take place. However, clients do not meet there, always on site.

Any waste produced by GHS will be disposed of at the residential jobsite via dumpster or transported to Errco waste facility in Epping N.H. or Casella waste in Brentwood N.H.

GHS will Not store or stock flammable and or hazardous chemicals/materials at the property of 29 Crane Crossing rd. Newton N.H.

Signature of GHS Representative: _____



Print Name: _____

Nicholas Nickbarke

Date: _____

5-2-2024