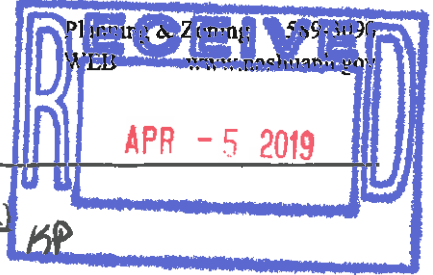




City of Nashua
Planning Department
 229 Main Street
 Nashua, New Hampshire 03061-2019



SPECIAL EXCEPTION APPLICATION (ZBA)

PLEASE NOTE: INCOMPLETE OR ILLEGIBLE APPLICATIONS WILL BE RETURNED TO APPLICANT.

This application must be completed and submitted to the Planning Department no later than the dates listed on the Zoning Board of Adjustment (ZBA) schedule sheet. Please print clearly or type.

1. SPECIAL EXCEPTION INFORMATION

a. ADDRESS OF REQUEST 6 HIBISCUS WAY, NASHUA, NH. 03062
 Zoning District A9/FUOD Sheet C Lot 2068

b. SPECIAL EXCEPTION(S) REQUESTED:

Need to operate family child care home business.

c. LAND USE CODE SECTION(S) REQUESTING SPECIAL EXCEPTION(S) FROM: 190-36 and 190-47B

2. GENERAL INFORMATION

a. **APPLICANT / OPTIONEE** (List both individual name and corporate name if applicable)

(Print Name): NEELOFAR HAQUE

Applicant's signature Neelofar Haque Date April 05, 2019

Applicant's address 6 HIBISCUS WAY, NASHUA, NH. 03062

Telephone number H: (603) 578-0480 C: (603) 204-4448 E-mail: neelofar-haque.2000@yahoo.com

b. **PROPERTY OWNER** (Print Name): NEELOFAR HAQUE

*Owner's signature Neelofar Haque Date April 05, 2019

Owner's address 6 HIBISCUS WAY, NASHUA, NH. 03062

Telephone number H: (603) 578-0480 C: (603) 204-4448 E-mail: neelofar-haque2000@yahoo.com

*Agents and/or option holders must supply written authorization to submit on behalf of owner(s).

OFFICE USE ONLY	Date Received <u>4/5/19</u>	Date of hearing <u>5/14/19</u>	Application checked for completeness: <u>CF</u>
PLR# <u>2019-00069</u>	Board Action _____		
\$ _____ application fee <input type="checkbox"/>	Date Paid _____	Receipt # _____	
\$ _____ signage fee <input type="checkbox"/>	Date Paid _____	Receipt # _____	
\$ _____ certified mailing fee <input type="checkbox"/>	Date Paid _____	Receipt # _____	



3. PURPOSE OF REQUEST

Answer all questions below. Provide as much information as available to give the ZBA the necessary facts to review your case. Attach additional sheets if necessary. Please see "Procedures for Filing a Special Exception" for further information.

a. Describe the nature of your proposal. Please be specific.

Need to have my property zoned to operate family child care home business

b. Does your proposal involve the physical construction or expansion of a structure? Yes No
If yes, describe how the size of the addition (and any existing structure) compares with the physical size of surrounding properties.

N/A

c. Do you anticipate the need for additional on-site parking space as a result of your proposal? Yes No
If yes, approximately how many square feet of paved or designated parking space will be provide for both existing and proposed usage?

N/A

d. What effects would the requested use have upon surrounding traffic congestion and pedestrian safety?

None

e. What measures will be taken (if any) to insure that your proposal will not impair the integrity or be out of character with the zoning district or immediate neighborhood?

None

4. SPECIAL EXCEPTION - ADDITIONAL QUESTIONS

Please answer all questions below that are applicable. Your answers to these questions will allow staff to better understand your request.

a. Total number of employees 1 Number of employees per shift 1

b. Hours and days of operation 7:00 AM - 5:30 PM M-F

c. Number of daily and weekly visits to the premises by customers, clients, vendors, and solicitors 0

d. Number of daily and weekly commercial deliveries to the premises Ø

e. Number of parking spaces available 4 in driveway plus street parking

f. Describe your general business operations:

Operate a state licensed family child care home business according to state requirements and regulations.

g. Describe any proposed site renovations, including, but not limited to – landscaping, lighting, pavement, structural changes, signage, access, and circulation:

Install fence in the backyard to be used as children play area.

I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all the city ordinances and state laws regulating construction. I understand that only those point specifically mentioned are affected by action taken on this appeal.

Neelofar Haque
Signature of Applicant

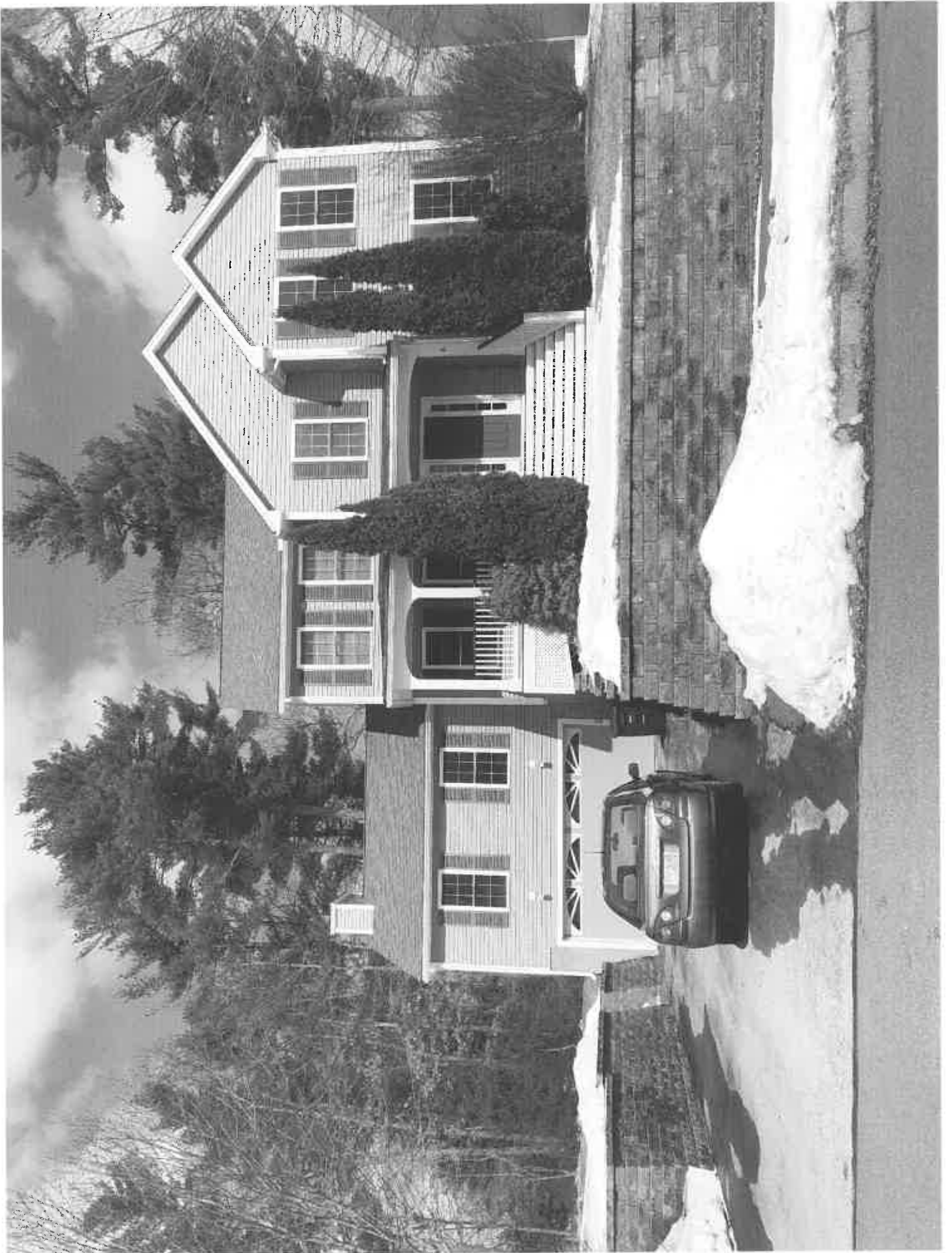
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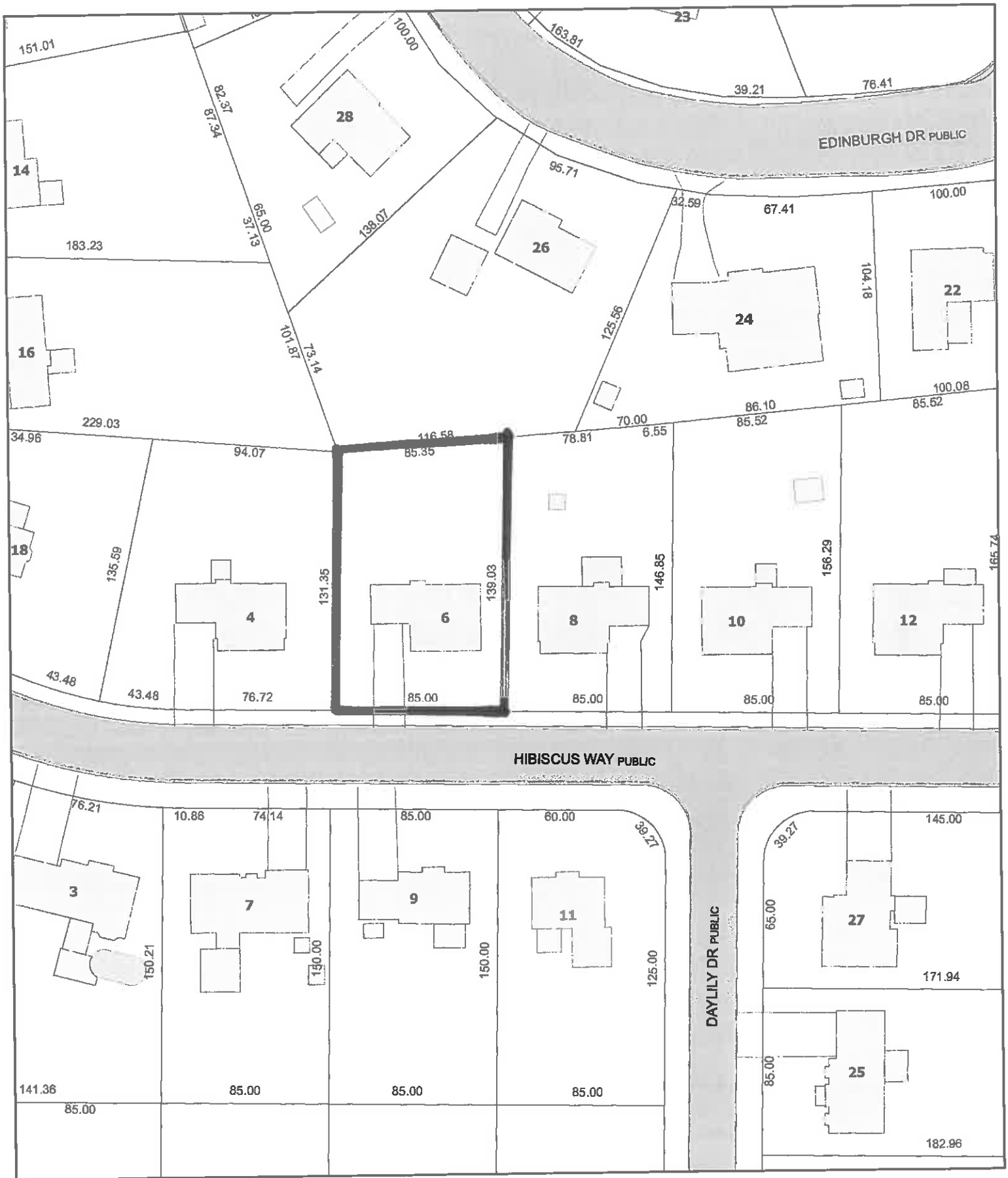
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Print Name

April 05, 2019
Date

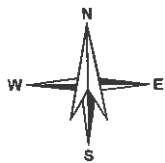


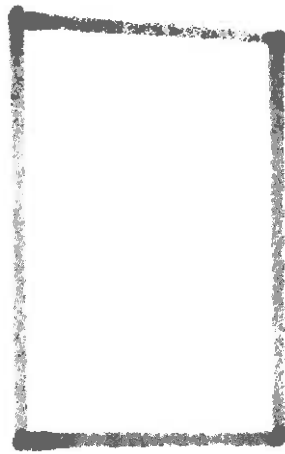






6 Hibiscus

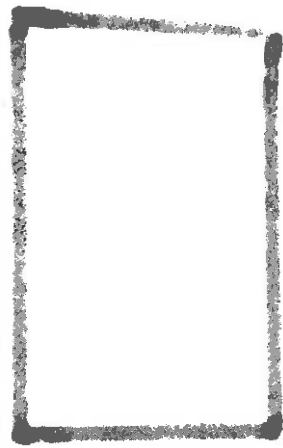






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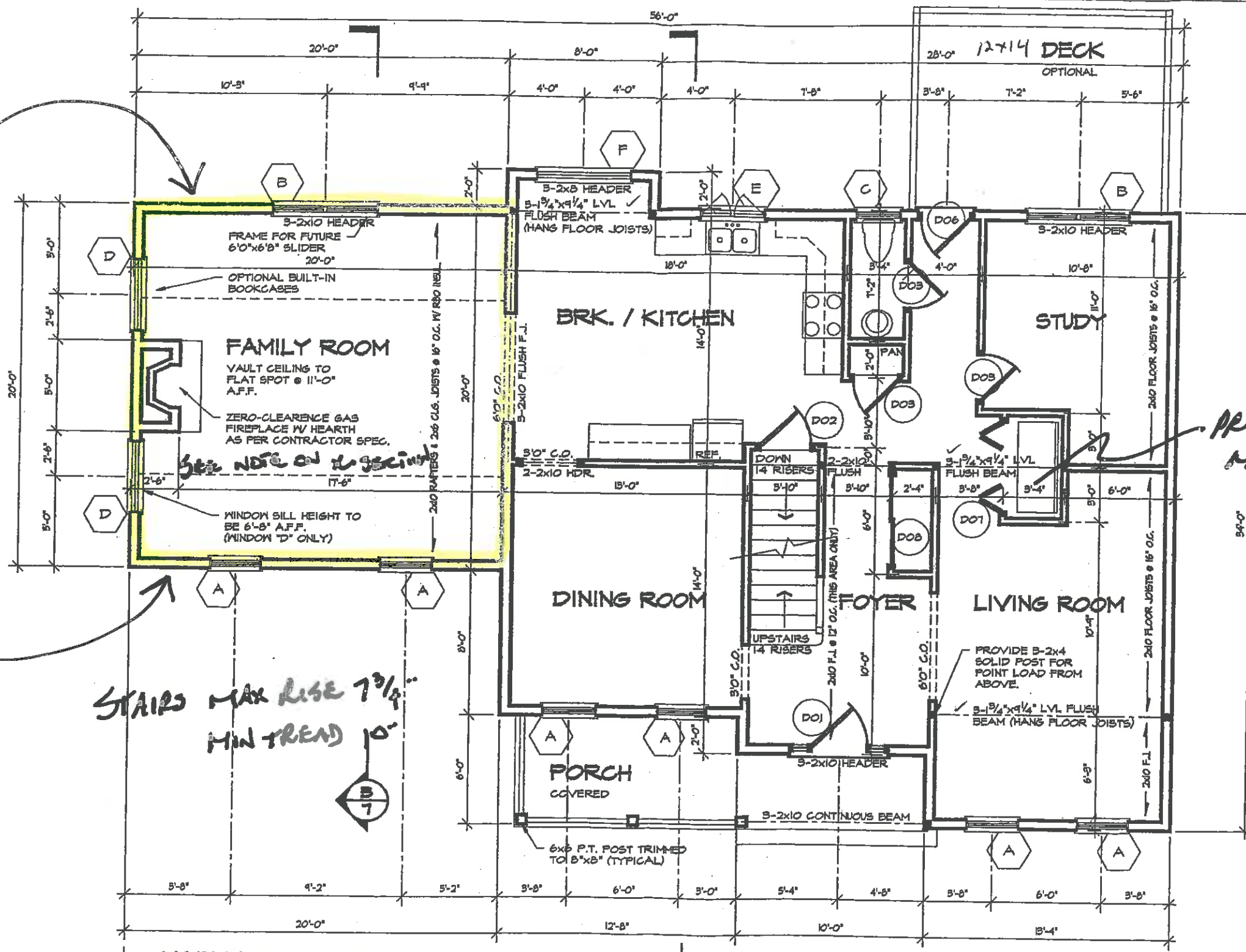




FAMILY ROOM
TO BE USED
FOR IN-HOME
CHILD CARE
20' x 20'
400 SF?

STAIRS MAX RISE 7 3/4"
MIN TREAD 10"

PROVIDE COMBUSTION
MAKE-UP AIR



MAIN FLOOR PLAN

- NOTES:**
- 8'-0" CEILING HEIGHT
 - ALL INTERIOR DOOR HEADERS TO BE 2-2x8 UNLESS OTHERWISE NOTED.
 - ALL EXTERIOR WINDOW & DOOR HEADERS TO BE 3-2x8 UNLESS OTHERWISE NOTED.

CONTRACTOR TO VERIFY ALL DIMENSIONS AND STRUCTURAL MEMBERS PRIOR TO STARTING CONSTRUCTION. BUILDING PERMITS TO BE OBTAINED FROM ALL STATE AND LOCAL BUILDING CODES.

JAD DESIGN GROUP INC.
P.O. BOX 128 AMHERST, NH 03801
PHONE: (603) 578-1930
FAX: (603) 578-1992

DESIGNED BY: PARADISE
CUSTOM RESIDENCE
NASHUA, NH

MAIN FLOOR PLAN
SCALE: 1/8" = 1'-0"
1524 SQUARE FEET

SHEET
A-3

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