St. Charles Parish Council c/o Barbara Jacob Tucker P. O. Box 302 Hahnville, LA 70057

Re: Opposition to Home Occupation Request for 733 Marino Dr., Norco

Dear St. Charles Parish Council Members,

As residents of the neighborhood surrounding the property located at 733 Marino Drive in Norco, we are OPPOSED to the approval of a home occupation request by the homeowner for a "service station service" business to be located near our homes.

The property in question is zoned RESIDENTIAL, and we do not wish to have any commercial, business, or industrial activity near our homes. We are opposed to the characteristics of a business in our neighborhood including, but not limited to, visible electrical/mechanical equipment, gasoline pumps, and transportation for such equipment and gasoline pumps.

The property at 733 Marino Dr. is frequently in need of lawn maintenance. In addition, there is a dilapidated house/shed located on the property which is an eye-sore and safety/health hazard to the neighborhood. The addition of gasoline pumps and/or equipment to this property adds to its already unsightly appearance.

As residents and homeowners, we all work very hard to maintain the beauty of our neighborhood and keep up the property value in our area. We cannot allow the wish of one resident for a home occupation to outweigh the good of the entire community.

Please vote AGAINST the request for home occupation at 733 Marino Drive in Norco.

Sincerely.







APP' ID# 18659



St. Charles Parish Department of Planning & Zoning

Planning & Zoning P.O, Box 302 Hahnville, LA 70057 (985)-783-5060 Fax (985)-783-6447

PERMIT APPLICATION HOME OCCUPATION PERMIT

| PERMIT #: 1734-08 DATE RECEIVED: 4/17/08 |
|--|
| RECEIPT#: 19355 ZONING DISTRICT: P-1 AF |
| DATE POSTED: NOTICES DATE: |
| SUBDIVISION: COO & HOPE Plantation |
| APPLICANT: JOE A. CHRISTIAN III |
| IS THE APPLICANT THE OWNER OF THE AFFECTED PROPERTY? YES |
| MAILING ADDRESS: 733 MARIND DRIVE, MORED, LA 70019 |
| STREET ADDRESS: SAME |
| NAME OF BUSINESS: PETROTECHS DE LA. INC. |
| BUSINESS ADDRESS: 733 MARIAD DR LINESD LA DADRE |
| PHONE #'S: V504-275-6597 085-307-0236 02 504-343-8063 |
| PHONE #'S: V504-275-6597 085-357-0236 52 504-343-8063 E-MAIL ADDRESS: (PERS ON 121 17 357.) |
| Below specify the type of business you are applying to operate from your home, and in detail, explain how |
| you plan to operate the business, any materials that will be stored at the home, or any vehicles used either |
| partially or exclusively for the business, that will be kept at the home: |
| The type of business is a Service Station |
| and other small miss. Darts. One vehille. |
| Business operation from the house ic |
| early parts storage + paper work. France |
| Do boses work in p.m. Work on comades |
| Kade punge No customers will come |
| HOME OCCUPATION DEPINITION: A home occupation is an accessory use of a dwelling unit. |
| conducted by one or more persons who reside at the property in question. The home occupation is observy incidental and secondary to the use of the dwelling for residential purposes and does not change the |
| character thereof or adversely affect the uses permitted in the residential district of which it is a port. |
| IMPORTANT NOTICE: READ CARLEULLY BEFORE COMPLETING THIS APPLICATION! |
| You are continued that the regard does NOT allow operation of a home occupation in violation of the large and ordinances. Your home occupation location MAY he checked by the Planning Department, Health |
| Unit, and Fire Department Personnel. If you have any doubt that your home occupation location anglor building does not conform to the requirements of the ordinances administered by these departments, you |
| are urged to contact them for further information before tiling this application for a Home Occupational Promit. YOU MUST ACKNOWLEDGE YOUR UNDERSTANDING, ACCEPTANCE OF, AND |
| COMMITMENT TO COMPLY WITH EACH OF THE FOLLOWING PROVISIONS BY |
| INITIALING IN THE SPACE PROVIDED. |
| 1. I will use only hand tools and minor weethenical equipment. No piece of equipment that exceed 2 horsepower and the total of all mechanical and/or vicetric equipment shall not |
| exceed 6 horsepower. A single kiln shall not exceed 8 kilowatts or the equivalent in 1 gat- |
| fired fixture, |
| 2. I agree that no sales of products and no services will take place at this hume occupation unless specifically sutherized by the Planning Director. |
| 3. I will not place any signs of any type on the property regarding the home occupation. |
| 4. I will not have any vehicle greater than one ton (manufacturer's rating) at the home. No |
| thore then one licensed vehicle will be utilized in connection with the home accuration. |

| occupation | family, who actually resides at the home with me, will engage in the home ap. I will not have any employees come to my home, I will not have any customers 9 my home, unless specifically authorized byt the Planning Director. |
|--|---|
| 6. I will limi | it all stornge of unterials or products to 20% of gross floor area of the dwelling, ge will be inside a building. |
| inside u ŝ | |
| ■ S. The home | e occupation will not climinate required off-street parking. |
| to: incres incompati governme sewer sys | est the home occupation shall not cause external effects, including but not ilmited and noise, excessive traffic, excessive lighting, or offensive odor, which is like with the characteristics of the residential zone, or in violation of any applicable equal code. There will be no illegal discharge of materials, fluids, or gases into the news, or any other manner of dischurging such itums in violation of any ental code. |
| | ain parish Occupational License and a Health Certificate from the Parish Fically ent when required |
| of Planni provide a | orlde a capy of the parish Occupational License for the business to the Department or and Zoning upon its issuance and upon renewal of that license annually. I will copy of the exceptional license to the Department of Planning and Zoning by of March of such calendar year. |
| | as the Flanning Department, Fire Department or Louisinna State Fire Marshall be department my inprect my promines at any time. |
| | and that failife to ahide by the twelve statements above will cause the hom; on permit to be revoked. |
| | ther read and agree to abide by St. Charles Parish Ordinance regulating home ons, as well at any special provisions required by the Plauning Director, |
| CHECKLIST O | OF ITEMS NEEDED TO PROCESS APPLICATION: |
| A. Act of | Sale to Property |
| N/A B. Signed | and notarized affidavit from property owner, if applicant is not the |
| proper | ty owner. |
| C. Print o | out of abuiting property owners from the Assessor's Office. |
| D. Check | or money order for \$200 made payable to St. Charles Parish |
| Depart | tment of Finance. |
| ACKNOWLEDGE SPECIAL PROVIE ACKNOWLEDGE CONSTITUTES A OCCUPATION PE | |
| If the applicant live | NATURE: DATE: 4/15/108? reis is not the property owner, a written and notarized felter of consent must be owner to abtain the home accupation permit. |
| | roved/disapproved on this date: |
| SPECIAL PROVIS | |
| SECOND PROVIS | JDV/15/J |
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