

RECEIVED
MAY 18 2023

Application BY: _____
Site Plan Review



- _____ Minor Site Plan
- _____ Major Site Plan
- _____ Design Review
- _____ Insignificant Change of Use
- Conditional Use Permit

Application: PB #	2023-403
Submission Date:	5/18/23
Hearing Date:	___/___/___
Fees Paid	
Application Fee:	\$ 200.00
Abutter Fee:	\$ 56.75
Public Notice Fee:	\$ _____
Recording Fee:	\$ _____
Total Fees Paid:	\$ _____
<small>For Municipal Use Only</small>	

APPLICATION MUST BE TYPED OR PRINTED LEGIBLY IN PEN

Applicant Information

Property Owner(s) of Record: _____
All Owner(s) of Record Must Be Listed and REQUIRED Sign the Application

Property Address: 1803 N.H. Route 140 Private Road or Class V

Mailing Address: PD Box 16, Gilman, NH, 03237
If Different than the subject property Street or PO Box City/Town State Zip

Home # [REDACTED] **Cell #** [REDACTED] **E-mail** [REDACTED]

Applicant(s): Kristen Clairmont DBA BASE Program

Mailing Address: 1395 Province Rd., Gilman, NH, 03237
If Different than the property Owner(s) Street or PO Box City/Town State Zip

Home # _____ **Cell #** [REDACTED] **E-mail** [REDACTED]

Land Agent: _____

Mailing Address: _____, _____, _____, _____
Street or PO Box City/Town State Zip

Business # _____ **Cell #** _____ **E-mail** _____

Please describe in detail ALL existing uses on the subject property. Include primary use and all accessory uses:
Church was recently being used for church services and a large fellowship program

Please describe in detail the proposed development:
Church Basement and yard will be used for Summer Camp program and Preschool M-F 8-5pm max

Capacity 45 children but enrollment will be about 10 preschoolers and 20 School age children. The program is licensed by the state of N.H. childcare Lic dept.

Subject Property

Zoning District: V Total Acreage: .82Ac

Has the subject property received previous Site Plan Approval? Yes or No

If yes, when: _____

Previously Approved Development: Church

If denied, state the reason for the denial: N/A

Is the property subject to:

- Deeded Covenants or Restrictions Yes or No
- Current Use Yes or No
- Conservation Easement Yes or No
- Private Easement(s) Existing Yes or No
- Public Utility Easements Granted (Electric or Telephone) Yes or No
- Right-of-Way Granted Yes or No
- State Driveway Permit Yes or No ← DOT District 2 - Gilford
- Local Driveway Permit Yes or No

Facility Data

- State Approved Private Septic Yes or No Existing 1969? Proposed
- Private Well/Water Supply Yes or No Yes or No

Other Considerations

- Yes or No Does the proposal meet all Zoning Ordinance Requirements of Article IV, Table 2?
- Yes or No If no, have you received or applied for a Variance from the ZBA? If yes, when? _____ Approved/Denied/Pending
- ~~Yes or No~~ If ZBA approval is required; would you like to request a Joint Meeting?
- Yes or No Is a Conditional Use Permit in conjunction with this application required according to Zoning Ordinance Requirements of Article IV, Table 1?
- ~~Yes or No~~ Are there specific conditions set forth by the ZBA? Please list: _____
- Yes or No Does the proposal require the development of a road(s)?
- ~~Yes or No~~ If a new road is proposed, are sidewalks or streetlights, culverts and other improvements included on the plan?
- Yes or No Does the proposal require that a Right-of-Way be provided?

Certification & Signature Page

1. The Applicant and/or owner, and/or agent, certifies that this application is correctly completed with all required attachments and that any additional reasonable costs for engineering or professional services incurred by the Planning Board or the Town of Gilmanton in the final application process of this property shall be borne by the following party: (Please initial the line of the respective party)

 Applicant Owner _____ Agent

*** Failure to indicate a responsible party for fees associated costs will result in the denial of the application without a public hearing in accordance with NH RSA 676:41(e)(2) - (As amended)*

2. The Owner/Agent hereby authorizes the Gilmanton Planning Board and its agents to access the subject land for the purpose of reviewing this site plan, performing road inspections and any other inspections deemed necessary by the Board or its Agents, to insure conformance of the on-site improvements with the approved plan and all Town of Gilmanton Ordinances and Regulations.
3. The undersigned Owner/Agent hereby submits to the Gilmanton Planning Board a Completed Application Package and respectfully requests its approval of said plat. In considerations for approval and the privileges occurring thereto, the owner hereby agrees, as applicable:
 - To carry out the improvements agreed upon and as shown and intended by said plat, including any work made necessary by unforeseen conditions, which become apparent during construction.
 - To provide and install standard street signs as approved by the Town for all street intersections.
 - To give the Town on demand, proper deeds for land or rights of ways reserved on the plat for streets, drainage or other purposes as agreed upon during the public hearing.
 - To save the Town harmless from any obligation it may incur or repairs it may make, because of my failure to carry out any of the foregoing provisions.
 - To make no changes whatsoever in the Final Plat as approved by the Board unless a revised plan or a plat or new application is submitted and approved by the Planning Board.
 - To construct improvements or post the Planning Board's Performance Guarantee to insure completion of the improvements shown on the plat and related drawings.
 - There are no known violations of the Town of Gilmanton Zoning Ordinance or Gilmanton Planning Board Regulations present on the property that have not been disclosed as part of this application.
 - To insure proper boundary monumentation at the project's completion in accordance with the Town of Gilmanton Site Plan Review Regulations.

Authorization to Act as Agent

Mr./Mrs./Ms. Kristen Clairmont (Please Print) is hereby designated as the person who is authorized to act as my agent in securing any and all permits necessary from the Gilmanton Planning Board for the development of my property, all communications to the owner may be addressed to the agent with copy provided to the property owner.

Certification:

➔ Owner of Record signature: _____ Date: 5/17/23

Owner of Record signature: _____ Date: _____



**Town of Gilmanton, New Hampshire
Planning Board
Academy Building
503 Province Road
PO Box 550**

**Gilmanton, New Hampshire 03237
planning@gilmantonnh.org
603.267-6700 ex 122 -Phone 603.267.6701 -Fax**

Bre Daigneault, Comm. Dev. Dir.
Mark Fougere, Certif. Planner
C. Roy Buttrick, Chair
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Mark Warren, Select Rep.
Brett Currier, Member
Jake Dalzell, Member
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**Conditional Use Permit Application
Addendum to Site Plan Review**

DATE RECEIVED: 5/18/23

M/L: 115-3

APPLICATION MUST BE TYPED OR PRINTED LEGIBLY IN PEN

I. Applicant and Owner Information

Name of Applicant: Kristen Clairmont Telephone: [Redacted]

Email: [Redacted]

Address of Applicant: 1395 Province Rd, Gilmanton NH 03237
(Street/PO Box) (Town/City) (State) (Zip Code)

Property Owner: Christopher Stevens Telephone: [Redacted]
(If different from Applicant)

Email: [Redacted]

Property Owner Address: 37 Alice Dr, Concord NH 03303
(Street/PO Box) (Town/City) (State) (Zip Code)

II. Property Information

Tax Map: 115 Lot #: 3 Zoning District: [Checked] Overlay District: N/A

Address of Property: 1803 NH Rt 140 Gilmanton NH 03837
(Street/PO Box) (Town/City) (State) (Zip Code)

Existing Use of Property: Church / Homeschool program

Type of Conditional Use Permit:

<input checked="" type="checkbox"/> Child Care Facility	<input type="checkbox"/> Cottage Industry	<input type="checkbox"/> Offices (2,000 sq ft or less)
<input type="checkbox"/> Retail Business	<input type="checkbox"/> Service Business	<input type="checkbox"/> Kennel
<input type="checkbox"/> Dwelling (Two-Family)	<input type="checkbox"/> Dwelling (Multi-Family / New Construction)	<input type="checkbox"/> Dwelling (Multi-Family / Interior Alterations)
<input type="checkbox"/> Kennel	<input type="checkbox"/> Wireless Telecommunications Facilities	<input type="checkbox"/> Solar Energy System (Ground/Pole Mounted)

Describe proposed use or activity that requires Conditional Use Permit consideration and describe any impacts: We would like to operate a small school age and preschool program in the church basement. The program will run m-f in the summer 8-5pm and during the school year only preschool will run 8-5 and school age will be mornings and afternoons. We believe this program will have no impact if not less than the previous program.

Land Agent Prepared Plans: [Redacted]

Address: [Redacted] Telephone: [Redacted]

Professional License #: [Redacted] Email: [Redacted]

Conditional Use Permit Application Continued

It is the burden of the Applicant/Owner/Land Agent/Legal Representation to prove that the proposed use will comply with the following:

1. The proposed use(s) is/are consistent with the adopted Master Plan.
2. The specific site is in an appropriate location and of adequate size for the use.
3. The use, as developed, will not adversely affect the character of the area in which the proposed use will be located.
4. There will be no nuisance or serious hazard to vehicles or pedestrians.
5. The use will not place excessive or undue burden on Town services and facilities.
6. There would be no significant effect resulting from such use upon the public health, safety and general welfare of the neighborhood in which the use would be located.

III. Authorization to Enter Subject Property

I/We hereby authorize members of the Gilmanton Planning Board, Planning Department, Conservation Commission and other pertinent Town Departments and boards to enter my property for the purpose of evaluating this application, including performing inspections during the application phase, post-approval phase, construction phase and occupancy phase. It is understood that these individuals must use all reasonable care, courtesy, and diligence when on the property.

Signature of Property Owner: _____
(ALL Owners of Record Must Sign the Application)

Date: 5/17/23

_____ Date: _____

IV. Signatures

I/We hereby submit this application to the Town of Gilmanton Planning Board and attest that to the best of my/our knowledge all of the information on the application form and in the accompanying application materials and documentations is true and accurate. As applicant or as agent, I attest that I am duly authorized to act in this capacity.

Signature of Property Owner: _____
(ALL Property Owners of Record Must Sign the Application)

Date: 5/17/23

_____ Date: _____

Signature of Applicant: _____
(If Different from Owner)

Date: 5/18/23

Signature of Agent: _____

Date: _____

The Gilmanton Community Church
The Rev. Christopher Stevens
P.O. Box 16 Gilmanton, N. H. 03237
603-267-6150
E-Mail: gilmantonchurch@gmail.com
Face Book: www.facebook.com/gilmantoncommunitychurch

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BY: _____

May 18, 2023

Town of Gilmanton Planning Board;

Please accept this letter as written permission for Kristen Minard to apply on our behalf for a site plan and a conditional use permit for a childcare facility at our property located at 1803 NH Rt. 140, Gilmanton Iron Works, NH.

Thank you,



Chris Stevens

Pastor and Church Council Representative

Gilmanton Community Church

PO Box 16

Gilmanton, NH 03237





100 feet Abutters List Report

Gilmanton, NH

May 17, 2023

Subject Property:

Parcel Number: 115-003-000
CAMA Number: 115-003-000-000-000
Property Address: 1803 NH RT 140

Mailing Address: GILMANTON COMM CHURCH, INC
PO BOX 16
GILMANTON, NH 03237

Abutters:

Parcel Number: 115-001-000
CAMA Number: 115-001-000-000-000
Property Address: 1785 NH RT 140

Mailing Address: WOODARD, AUDREY M
PO BOX 284
GILMANTON IW, NH 03837

Parcel Number: 115-002-000
CAMA Number: 115-002-000-000-000
Property Address: 1795 NH RT 140

Mailing Address: COULSTRING, DENISE M
1795 NH RT 140
GILMANTON IW, NH 03837

Parcel Number: 115-004-000
CAMA Number: 115-004-000-000-000
Property Address: 1807 NH RT 140

Mailing Address: GILMANTON COMM CHURCH, INC
PO BOX 16
GILMANTON, NH 03237

Parcel Number: 115-005-000
CAMA Number: 115-005-000-000-000
Property Address: 1817 NH RT 140

Mailing Address: GILMANTON COMM CHURCH, INC
PO BOX 16
GILMANTON, NH 03237

Parcel Number: 115-006-000
CAMA Number: 115-006-000-000-000
Property Address: 3 OLD TOWN RD

Mailing Address: FIELD, JONATHAN M
3 OLD TOWN RD
GILMANTON IW, NH 03837

Parcel Number: 115-008-000
CAMA Number: 115-008-000-000-000
Property Address: OLD TOWN RD

Mailing Address: MUNSEY, JAMES J
PO BOX 13
GILMANTON IW, NH 03837

Parcel Number: 115-041-000
CAMA Number: 115-041-000-000-000
Property Address: 1808 NH RT 140

Mailing Address: MELLE, TERRY & JOANNE P
PO BOX 10
GILMANTON IW, NH 03837

Parcel Number: 115-042-000
CAMA Number: 115-042-000-000-000
Property Address: 1800 NH RT 140

Mailing Address: GILMANTON, TOWN OF
PO BOX 550
GILMANTON, NH 03237



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5/17/2023

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