



**Town of Wilton  
Building Department**

42 Main Street • P.O. Box 213 • Wilton, NH  
Phone: (603) 654-3960 • Fax: (603) 654-

November 5, 2019

Frank and Charlene Krol  
834 Mason Road  
Wilton, NH 03086

**Subject:** Re-opening of prohibited driveways and commercial use of road

Dear Mr. & Mrs. Krol:

As you are aware, you are in violation of a court order from Milford District Court order dated May 18, 2015 stipulates specific actions to be taken. A copy is attached to this letter.

You are in violation of Town of Wilton Zoning Ordinance as follows:

1. Section 4.6 Performance Standards
2. Section 6.1 Permitted Uses in the General Residential Agricultural District.
3. Land Use Laws Section G, Driveway Regulations

On March 28, 2016 you received a letter from the Building Inspector outlining the above violations of Town Zoning and District Court Order.

We have received many complaints regarding your use of your property. It appears you continue to use up to 3 driveways and have heavy equipment in and out of your driveways.

Violation of Zoning Ordinance is a misdemeanor, for which you may be subject to civil penalty of \$275 for the first offense and \$550 for subsequent offenses for each day the violation continues after written notification, in accordance with state statute RSA 676:17.

Upon receipt of this letter, you will be allowed thirty days from receipt to:

- Cease operating a business at your residence.
- Close off two of the three driveways and reconstruct the stone wall where it originally existed.
- Remove all construction equipment and vehicles within thirty days.

If you do not comply with this order, the Select Board will issue a formal Cease and Desist Order enforceable under the provisions of RSA 676:17-a.

Sincerely,

Norma Ditri, Building Inspector/Code Enforcement Officer

Encl: Wilton Zoning Ordinance, Wilton Land Use Laws, Milford District Court Order, Letter from Building Inspector June 20, 2014 and March 28, 2016.

Cc: Wilton Select Board  
Town Administrator

Thurs 12/5/19  
Atty Darren Brown  
545-2706

Is there any flex  
in the 30 day notice  
for Krols?

Mon<sup>12/4</sup> is 30 days.

Get me a response  
on Monday



# Town of Wilton

## Building Department

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### COMPLAINT FORM

Regarding Name of Property Owner: KROL Family Trst DATE: April 18, 2019

Property Address: 834 Mason Road Map/Lot#: H-80

Date of Initial Complaint: \_\_\_\_\_ Employee Receiving Complaint: M. Decoteau

Name of Complainant: Dawn Ohlund Address: 829 Mason Rd

Contact Information: H # <sup>603</sup> 315 7717 C# \_\_\_\_\_ E-mail \_\_\_\_\_

Nature and location of alleged violation: \_\_\_\_\_

Can the violation be seen from:  a public way \_\_\_\_\_ the air \_\_\_\_\_ Other \_\_\_\_\_

Any Witness(es) \_\_\_\_\_

\_\_\_\_\_ Anonymous: \_\_\_\_\_

Citizen's Signature \* \_\_\_\_\_ Date \_\_\_\_\_

Can remain anonymous

By signing this form the applicant attests that, under penalties prescribed by state and federal law, the information provided is true and accurate to the best of his/her knowledge.

Investigation Date: 4/22/19 Findings: Norma D'itri + Michele Decoteau

Photographed all three entrances, 2 are open, 1 is chained

Resolution: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature/Title

Signature/Title

Administrative Inspection Warrant dated: \_\_\_\_\_ in accordance with RSA 595-B:2

FOR OFFICE USE ONLY				
Assessing	Health	Building/Zoning	Planning	Fire
Public Works	Select Board	Town Clerk/Tax Collector	Other	Police

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Frank Krol  
834 Mason Road  
Wilton, NH 03086



9590 9402 3815 8032 6543 31

2. Article Number (Transfer from service label)

7019 2280 0001 2367 2523

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Frank Krol*

- Agent
- Addressee

B. Received by (Printed Name)

*Frank Krol*

C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt