

Home Occupation Permit Application

Applicant Information					
Applicant Name:			Phone:	Fax:	
Address:			City:	Zip:	
<u>Busi</u>	ness I	Information			
Name	of Busi	iness:			
		iness:			
Yes	No	Check Yes or No for each of the questions below	<u>N:</u>		
Yes	No	Will the Home Occupation alter or change t	he residential character or purpo	ose of the home or apartment?	
Yes	No	Will the Home Occupation create any appre	create any appreciable increase in traffic?		
Yes	No	Will the Home Occupation require additional	require additional parking spaces?		
Yes	No	Will the Home Occupation require the empl	n require the employment of persons other than domestic help?		
Yes	No	Will the Home Occupation create a nuisance electrical interference or other causes?	pation create a nuisance by reason of noise, dust, odor, vibration, fumes, smoke, e or other causes?		
Yes	No		tdoor storage of materials, equipment or supplies?Cubic feet:		
Yes	No	Will there be any mechanical equipment us or domestic appliances?	ed in connection with the Home	Occupation, other than clerical	
		If "yes", the applicant must obtain approval horsepower by filing an application for a Pl			
	"I dec	clare under the penalty of perjury that the fo	oregoing information is true ar	nd correct."	
Print Applicant Name:			Signature:	Date:	
Note:	e: There shall be no external display of products, merchandise or any sign to identify the home occupation. A permit shall be revoked by the Zoning Administrator upon violation of any requirement, condition of limitation, unless such violation is corrected within fifteen (15) days of notice of violations. Any permit may be revoked for repeated violations.				
		Conditio	ns of Approval		
"HOME FOR OFFICE USE ONLY. NO CUSTOMERS AND/OR EMPLOYEES ON SITE."					
		denial, revocation or objections to the limitation (10) days of the determination.	ns placed, thereon, an appeal m	ay be made to the Planning	
		FOR OFFICE (USE ONLY		
APPR	OVED	Finance Representative:		_Date:	
DENII	ED	Property is zoned:			
	NOTE	E: This is NOT a business license. A sepai Occupations. Please complete and sub to this form.			