APPLICATION FOR HOME OCCUPANCY
USE PERMIT

DATE_____
TYPE OF PROPERTY:

_____
PHONE NUMBER

SINGLE _____
DOUBLE _____

_____
ADDRESS OF PROPERTY

OTHER_____

_____
OWNER OF PROPERTY

_____
APPLICANT IF DIFFERENT
FROM OWNER

ZONING CLASSIFICATION_____

_____ATTACHED COPY OF SURVEY
_____ATTACHED COPY OF FLOOR PLAN SHOWING
_____HOME OCCUPATION SECTION OF DWELLING
_____ATTACHED PARKING PLAN

HOME OCCUPATION FOR:

_____

HOME OCCUPATION DEFINED: 120-64

AN ACCESSORY USE OF A DWELLING UNIT FOR GAINFUL EMPLOYMENT INVOLVING THE MANUFACTURER, PROVISION, OR SALE OF GOODS AND/ OR SERVICES.

APPLICANT MUST ANSWER ALL OF THE FOLLOWING:

THERE IS NO OTHER HOME OCCUPATION PERMIT EXISTING TO THE PIECE OF PROPERTY NOW BEING APPLIED FOR: ---------- ----------
YES NO

A.) WILL THE OCCUPATION BE CONDUCTED WITHIN A COMPLETELY ENCLOSED BUILDING? (N0 OUTDOOR SALES) ---------- ----------
YES NO

B.) IS THE OCCUPATION CLEARLY INCIDENTAL AND SECONDARY TO THE PRINCIPAL USE OF THE DWELLING? ---------- ----------
YES NO

C.) WILL THE HOME OCCUPATION CHANGE THE PRINCIPAL CHARACTER OF THE DWELLING? ---------- ----------
YES NO

D.) WILL THERE BE MORE THAN ONE EMPLOYEE OTHER THAN IMMEDIATE FAMILY MEMBERS RESIDING ON THE PREMISES? ---------- ----------
YES NO

E.) WILL LESS THAN 25% OF FLOOR AREA OF ONE (1) STORY OF THE DWELLING BE DEVOTED TO THE HOME OCCUPATION? ---------- ----------
YES NO

F.) WILL THERE BE ANY STOCK IN TRADE OR COMMODITIES SOLD, OTHER THAT INCIDENTAL SUPPLIES FOR AND CONSUMED IN THE CONDUCT OF THE HOME OCCUPATION? ---------- ----------
YES NO

G.) WILL ALL STORAGE OF MATERIALS, GOOD, SUPPLIES OR EQUIPMENT IN THE OPERATION OF THE HOME OCCUPATION BE HIDDEN FROM ANY STRUCTURE LOCATED ON THE PREMISES?

---------- YES ---------- NO

H.) WILL THERE BE ANY MECHANICAL EQUIPMENT USED EXCEPT SUCH AS USED FOR DOMESTIC OR HOUSEHOLD PURPOSES (OR AS DEEMED SIMILAR TO POWER & TYPE) ?

---------- YES ---------- NO

I.) WILL THE OCCUPATION REQUIRE ANY INTERNAL OR EXTERNAL ALTERATION OR INVOKE CONSTRUCTION FEATURES NOT CUSTOMARY IN A DWELLING?

---------- YES ---------- NO

J.) WILL THE USE GENERATE ANY NOISE, VIBRATION, GLARE, FUMES, ODORS, OR ELECTRICAL INTERFERENCE BEYOND WHAT NORMALLY OCCURS IN THE APPLICABLE ZONING DISTRICT?

---------- YES ---------- NO

K.) WILL ANY TRAFFIC BE GENERATED BY THE HOME OCCUPATION IN GREATER VOLUMES THAT WOULD NORMALLY BE EXPECTED IN A RESIDENTIAL NEIGHBORHOOD?

---------- YES ---------- NO

K1) WILL ANY INCREASE IN PARKING BE NEEDED?

---------- YES ---------- NO

K2) IF YES , WILL THE NEED BE MET WITH OFF STREET PARKING?

---------- YES ---------- NO

K3) THERE WILL BE ONLY (1) NON ILLUMINATED NAME PLATE NOT EXCEEDING TWO BY TWO (2 x 2) FEET DISPLAYING THE OCCUPANT AND/OR THE NAME OF THE HOME OCCUPATION?

---------- YES ---------- NO

I HAVE READ THIS QUESTIONNAIRE CAREFULLY AND COMPLETED THE NECESSARY APPLICATION REALIZING THAT IF ANY STATEMENT IS NOT TRUE MY HOME OCCUPATION PERMIT MAY BE DENIED OR VOIDED .

_____

SIGNATURE OF APPLICANT DATE

_____

SIGNATURE OF PROPERTY OWNER IF DIFFERENT FROM APPLICANT DATE

REVIEWED BY _____
BUILDING INSPECTOR