

APPLICATION FOR HOME OCCUPATION

A Home Occupation is defined as any occupation, profession, activity or use carried out by a resident with the intention of economic gain, and which is conducted as an accessory use in the residents dwelling or accessory structure on the premises of which they live.

Instructions

1. Application must contain the signature of all individuals listed on the deed for the property, and/or contract buyer.
 2. Each question on the applicant must be answered truthfully and thoroughly, use additional paper if needed.
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APPLICANT:

NAME: _____

ADDRESS: _____

CITY: _____

PHONE: _____

PROPERTY OWNER: (If different from applicant)

NAME: _____

ADDRESS: _____

CITY: _____

PHONE: _____

LOCATION OF PROPERTY TO BE USED FOR HOME OCCUPATION:

ADDRESS: _____

THE PURPOSE OF THIS APPLICATION IS TO PERMIT THE USE OF THE PROPERTY FOR:

OWNER'S EMAIL ADDRESS: _____

- | | |
|---|-----------|
| 1. Will any person other than the residents of the dwelling unit on the property be employed or engaged in said home occupation? | YES
NO |
| 2. Will more than twenty (20) percent of the total gross floor area of the dwelling unit be used for such home occupation? If yes, what percentage? _____% | YES
NO |
| 3. Will more than fifty (50) percent of any one floor of the dwelling unit be utilized for the home occupation? | YES
NO |
| 4. Will there be any retail sales conducted on the property requested for the home occupation (not including sales conducted exclusively off-premise or on the internet)? | YES
NO |
| 5. Will there be any publication or advertising involved which will include or use the residential address of the property? | YES
NO |
| 6. Will there be any exterior evidence that the home occupation is being conducted from the property? If yes, explain. | YES
NO |
| <hr/> <hr/> <hr/> | |
| 7. Will the home occupation be conducted exclusively within the dwelling unit or accessory structure? If no, explain. | YES
NO |
| <hr/> <hr/> <hr/> | |
| 8. Do you wish to, or foresee any traffic being generated by the home occupation? | YES
NO |
| 9. Will any equipment, process, or activity be used in the home occupation which would create noise, vibration, glare, fumes, odors, or electrical or television interference, which would be detectable from outside the property? | YES
NO |
| 10. Will there be any outside entrance or exit specifically for the home occupation? (this includes an entrance not intended to be used by residents, but customers or staff) | YES
NO |
| 11. Will there be any sign on the building or in the yard that advertises or identifies the business? If yes, do you intend to illuminate the sign? _____ | YES
NO |
| 12. Will there be any use, storage, or parking of semis, trailers, or heavy equipment on the property directly associated with the home occupation? | YES
NO |
| 13. Will any remodeling or renovations be required so that the dwelling unit can be used as a home occupation? | YES
NO |

APPLICATION REVIEW PROCEDURE

1. The application shall be reviewed by the Department to determine its classification is a Type I or Type II.
2. If classified as a Type I:
 - a. The Executive Director can approve or deny the application.
 - b. If approved, this application shall serve as an Administrative Permit for the home occupation.
 - c. The Executive Director may impose reasonable conditions as part of the approval.
 - d. The applicant may appeal to the Board of Zoning Appeals if the application is denied or the conditions are unacceptable to the applicant. On appeal of a condition(s), the appeal must be filed within fourteen (14) days of the date of the Executive Directors decision. The appeal may be subject to a filing fee.
3. If in the future, the scope of an approved Home Occupation Type I changes, a new applicant shall be submitted.
4. If classified as a Type II:
 - a. The application shall be reviewed and treated as a Special Exception request. A Special Exception request shall be reviewed by the Board of Zoning Appeals during a public hearing.
 - b. All required filing fees for the Special Exception request shall be paid by the applicant.

APPLICANT SIGNATURE	DATE
OWNERS SIGNATURE	DATE
PRINTED NAME	DATE

TO BE COMPLETED BY THE DEPARTMENT

Date application filed: _____

Classification of Home Occupation: Type I Type II

Application Reviewed by: _____

If Type II

BZA Filing Number: _____

Receipt Number: _____

Date of BZA Hearing: _____

Final BZA Decision: _____