

HOME OCCUPATION APPLICATION

Name: _____

Address: _____

Type of Use: _____

THE FOLLOWING IS TO BE COMPLETED BY APPLICANT

1. Area inside home and area used for business use:
 - a) Sq. Ft. of home: _____
 - b) Sq. Ft. of business area: _____
2. Number of unrelated employees: _____
3. Type of signs or advertisement to be used: _____

4. Sq. Ft. outside of home for business use: _____
(Attach site plan of property)
5. Days of the week business operates: _____
6. Hours of the day business operates: _____
7. Estimate of additional vehicles and/or parking the business use will generate:

8. If proceeds are generated through garage or patio sales, how many sales per year will be held:

Signature of Applicant

Date

FOR CITY USE ONLY

Date Received: _____

Reviewed & Approved: _____
Date

Authorized Signature

Reviewed & Approved: _____
Date

Authorized Signature

Reason for rejection: _____
