

**\$40.00 ONE TIME FEE**

**HOME OCCUPATION - LETTER OF INTENT**

*The following information must be furnished before the home occupation permit will be issued.*

- (1) Business Name \_\_\_\_\_
- (2) Business Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
- (3) Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
- (4) Owner's Name \_\_\_\_\_
- (5) Business Phone \_\_\_\_\_ Home Phone \_\_\_\_\_
- (6) Nature of Business (explain) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you are selling any goods for your business, are they made on the premises?  
YES  or NO

- (7) What percentage of gross floor area in this dwelling unit is occupied by this business? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- (8) Do you have any outside storage or display of items associated with the home occupation?  
YES  or NO  If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- (9) Is your home occupation conducted entirely within the dwelling unit exclusive of a garage or carport? YES  or NO  If no, please explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- (10) Is your home occupation clearly incidental and secondary to the use of the dwelling unit for residential purposes, without changing the appearance of the residence? YES  or NO  If no, please explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- (11) Is any part of your business or any accessory storage in a detached garage or in any other accessory structures? YES  or NO  If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(12) Number of employees \_\_\_\_\_  
Do you have more than one person employed who is not an occupant of the residence?  
YES  or NO

(13) Do you teach music, dance, art or similar subjects? YES  or NO  If yes, how many students do you have at one time? \_\_\_\_\_

(14) Does your business generate any traffic, parking, noise, vibration, glare, fumes, odors, or electrical interference beyond what normally occurs in the district in which it is located? YES  or NO  If yes, please explain. \_\_\_\_\_

(15) Do you have any commercial vehicles or trailers in conjunction with the home occupation? YES  or NO  If yes, how many of each do you have and what are their lengths? \_\_\_\_\_

(16) Will any maintenance or repairs of commercial equipment associated with the home occupation be conducted on the property? YES  or NO  If yes, please explain. \_\_\_\_\_

(17) Do you rent rooms in your home (including the serving of meals for compensation)? YES  or NO  If yes, how many people stay in any given day? \_\_\_\_\_

(18) Do you have a day care in your home (child or adult)? YES  or NO  If yes, how many people do you have in any given day? \_\_\_\_\_

**Regulations for operating a day care in your home:**

You must have five (5) or less full-time attendees.

You must provide an off-street drop-off/pick-up area for the individuals in the day care.

You may also provide after school care for up to three (3) additional children, who are less than thirteen (13) years old, for not more than four (4) after school hours in any twenty-four (24) hour period.

\_\_\_\_\_  
*Signature of Owner/Officer*

\_\_\_\_\_  
*Date*