HOME OCCUPATION APPLICATION / PERMIT
DATE _____
PERMIT NUMBER _____

1. **APPLICANT'S NAME:** _____
2. **APPLICANT'S ADDRESS:** _____

   _____ **ZIP CODE** _____
3. **TELEPHONE NUMBER:** _____ **WORK** _____ **HOME**
4. **ZONING DISTRICT:** _____
5. **TYPE OF BUSINESS TO BE CONDUCTED:** _____

_____

***I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND ACCURATELY DESCRIES THE TYPE OF ACTIVITY THAT I PLAN TO CARRY OUT WITHIN MY RESIDENCE. I ALSO CERTIFY THAT I HAVE READ AND WILL ABIDE BY ALL THE RESTRICTONS AND STANDARDS PERTAINING TO HOME OCCUPATION OUTLINED IN SECTION 709.05 OF THE ZONING ORDINANCE.**

_____
APPLICANT'S SIGNATURE

****

SECTION BELOW IS FOR OFFICE USE ONLY

1. **THIS TYPE OF HOME OCCUPATION IS PERMITTED UNDER THE ZONING ORDINANCE.**
   Yes _____ No _____
2. **THE APPLICATION APPEARS TO MEET ALL STANDARDS SPECIFIED UNDER SECTION 709.05 OF THE ZONING ORDINANCE. Yes _____ No _____**

I RECOMMEND: APPROVAL _____
DISAPPROVAL _____

_____ _____
DATE **ZONING ADMINISTRATOR**

PERMIT APPLICATION: APPROVED _____
DENIED _____

COMMENTS: _____
_____
_____
_____

_____ _____
DATE **BUILDING CODE OFFICIAL**

****NOTE: IF APPROVED, THIS FORM CONSTITUTES THE PERMIT. APPLICANT WILL BE ISSUED THE ORIGINAL, AND A COPY WILL BE RETAINED BY THE COMMUNITY DEVELOPMENT DEPARTMENT. THE FEE IS $50.00.**