



Home Occupation Application

Applicant Name: _____ Date: _____

Address: _____ Zip Code: _____

Telephone: Home: _____ Business: _____

Type of Business/Home Occupation: _____

1. Describe in detail the type of activities that are involved in the proposed Home

Occupation. _____

2. Describe in detail the method of operation for the proposed Home Occupation

3. Describe in detail the materials and equipment that will be used for the proposed Home Occupation including how, where, and in what amounts the materials and/or equipment will be displayed or stored.

4. How many persons will be involved or employed in the conduct of the proposed occupation:

Members of immediate family _____

Other _____

Total _____

5. Will the Home Occupation require employees, other than members of the immediate family, to work at your home? Yes _____ No _____

If yes, please explain.

6. Describe any alterations to the home or premises that might be required to facilitate your Home Occupation.

7. Describe what rooms will be used in the conduct of the Home Occupation and how these rooms will be used.

8. Will people come to your home to obtain any product or utilize any service connected with the proposed Home Occupation activity?
Yes _____ No _____ If yes, please explain in detail.

9. Are any signs necessary or proposed relative to the Home Occupation?
Yes _____ No _____ If yes, please describe the type, size, and location of the sign.

10. Will the Home Occupation involve the use of commercial vehicles for delivery of materials to or from the premises?
Yes _____ No _____ If yes, please explain.

11. Is your proposed Home Occupation in conformance with the conditions, covenants, and restrictions pertaining to your property?
Yes _____ No _____

I, the undersigned have been provided with a copy of the Home Occupation Regulations for the City of Huntington and agree to abide by all regulations therein.

Applicant Signature Date

Property Owner Signature Date

FOR OFFICE USE ONLY: Received by: _____ Title: _____ Date: _____ Application: <input type="checkbox"/> Approved <input type="checkbox"/> Denied Permit Number _____
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