



Town Use Only – do not write in this area

Date Received _____

Date Approved _____

Approved by _____

Minor Home Occupation Application

- please print or type -

Applicant _____

Property Owner _____

Mailing Address _____

Mailing Address _____

City, State, ZIP _____

City, State, ZIP _____

Phone Number (____) _____

Phone Number (____) _____

Address of home occupation _____ APN _____ - _____ - _____

Description of home occupation _____

Please indicate which of the following apply:

- The home occupation is an office involving the use of the telephone, computer, mail, and common delivery services only, and no employees, customers, clients, students, patients, or persons in similar relationships with the office's affairs visit the home as a regular business practice, and/or,
- The business related to the home occupation is conducted elsewhere, but some or all of the equipment and materials are kept in one vehicle garaged on the premises.

Applicant/owner certifications, agreements and acknowledgements:

- a) In the event the Property Owner is different from the Applicant, the Property Owner must sign to indicate their consent to the filing.
- b) Additional property owners and/or applicants (name, address, telephone number, and signature) shall be included on the application.
- c) In the event the Town is required to take legal action to enforce any of the terms and conditions of this application, the Applicant and Property Owner agree to pay to the Town reasonable attorney fees and costs incurred in such action.

Property Owner Signature(s) _____ **Date** _____

_____ **Date** _____

Applicant Signature(s) _____ **Date** _____

_____ **Date** _____