

CERTIFICATE OF HOME OCCUPATION AUTHORIZATION

Name*:					
Busi	ness Name & Description:				
Num	ber of Employees: Floor Area:Storage Provision:				
Туре	& Number of Vehicles: Other:				
	ng authorization is hereby granted for this home occupation stated herein by Chapter 15.04.610.230 of Iunicipal Code subject to the following conditions:				
	Primary use must be the residence of the person conducting the occupation.				
	The home occupation is conducted entirely within the principal dwelling. A garage shall not be used in connection with a home occupation, if such use interferes with its primary use as vehicular storage.				
	No outdoor storage or display of vehicles, equipment, materials, or supplies related to the home occupation shall be permitted. Exception: one business vehicle, up to one ton capacity, with signage, used for the home occupation shall be permitted. The applicant shall describe all materials, including hazardous materials and how they would be used.				
	No more than one person other than resident(s) of the dwelling shall be employed on-site or report to work at the site of the home occupation except for other employees of licensed child care facilities. This prohibition also applies to independent contractors.				
	The home occupation shall not generate vehicular or pedestrian traffic in excess of that which is normally associated with residential uses in the same district. Exceptions:				
	 a. Child care up to 12 children b. Individual instruction or tutoring, professional services, consulting and single-chair barber or beauty shop provided they serve one client at a time. 				
	There shall be no exterior indication of home occupation, including signs.				
	The home occupation shall not create noise, odor, dust, vibration, smoke, electrical disturbance, or any other interference with residential uses of adjacent property.				
	Home occupations shall comply with all other applicable City codes and Ordinances.				
	Child core up to 12 children, individual instruction or tutoring, courseling, consulting and single chair				

└ Child care up to 12 children, individual instruction or tutoring, counseling, consulting and single-chair barber or beauty shops-if they are receiving clients in the home as allowed under conditions 5 above-shall be permitted as home occupations in single-family dwellings only.

ACCEPTANCE:

The undersigned understands and accepts the conditions set forth above, agrees to comply with these conditions, understands that failure to comply therewith will be a violation of the Municipal Code and render the permittee liable, upon conviction of such violation, to punishment by a fine not to exceed \$500 or by imprisonment for a period not to exceed 6 months or by both such fine and imprisonment. This authorization is also subject to ALL other applicable provisions of the Richmond Municipal Code.

Disclosure Statement for Limited Liability Companies

Whenever the owner of a property or the applicant for a City permit or license is a limited liability company ("LLC"), the LLC shall provide the City with the names and business addresses of any and all shareholders, directors, officers, members, managers, other authorized persons, partners, and "Beneficial Owners" of the applying LLC. A Beneficial Owner is any person or entity who: (1) exercises substantial control over the applying LLC; (2) owns 25% or more of the interest in the applying LLC; or (3) receives substantial economic benefits from the assets of the applying LLC. If any LLC shareholder, director, officer, member, manager, other authorized person, partner, or Beneficial Owner is itself an LLC or other business entity, the names and business addresses must also be provided for any and all shareholders, directors, officers, members, managers, other authorized persons, partners, and Beneficial Owners of that LLC or other business entity all the way up through each entity in the organizational chart until ultimate ownership by individual people is disclosed.

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 \Box Check this box if additional ownership information is attached to this Disclosure Statement.

In signing this Disclosure Statement, I represent that the information submitted in this Disclosure Statement, and any attachments, is true and correct.

Signature:

Printed Name:

Title:		

Date:	