

Town of Goldston

Central Pines Regional Council Planning Department 4307 Emperor Blvd, Suite 110 Durham, NC 27703 (Ph) 919-503-3431

HOME OCCUPATION PERMIT APPLICATION

ED 1901	Type: Please check of minimum)	one: Neighbor	hood Rural (Re	equires 3 ac
(1) Applicant Information Name Address			(2) Landowner Information Name Address	
(W) /) J)		(W)	
	ant is different from tion form)	landowner, pleas	e provide signed le	gal representation
(3) Proper	ty Identification:			
911 Address			Parcel #	
Township Flood Maj	strict p #		AcreageFlood Zone	(11-17-2017)
Watershed Deed Boo	l k Page	Year	Plat Book	Page
(5) Descri	be the type of occupa	ation/business to be	operated from the p	roperty. Also list
	on-resident employee ls of the trade? Ye			ather materials
If accessor	ne business be carried ry building, what is the detailing the location	ne total square foot	age?(P	Please provide a
	ne general public be com this business?	<u> </u>	rty to receive service	es or purchase
(9) If #6 a be located	nd #8 are yes, how m	nany parking spaces	will be provided an	d where will they
(10) Will	the occupation be adv	vertised by a sign?		

(11) If the answer to # 10 is yes, where will the sign be located? (Note: Signage must be no larger than 4 sq. ft. and must be located outside the NCDOT right-of-way on the same property with the home-based business)					
(12) Will there be any noise, glare, vibration, odors, or electrical interference associated with your home occupation?					
(13) If the answer to # 12 is yes, please describe noise, etc. and how it will be controlled so it will not be a nuisance.					
This permit is valid only as long as the use meets the provisions for home occupations specified in the Town of Goldston Unified Development Ordinance and may be revoked any time the use does not meet these provisions or other applicable ordinances. The permit is not transferable.					
In addition to compliance with the Town of Goldston Unified Development Ordinance regarding operating a home-based business/home occupation, <u>I</u> understand I may also be required to comply with other local, state, or federal laws, rules, ordinances that pertain to the operation of this business/occupation BEFORE beginning said business/occupation.					
I hereby certify that I am making application for the landowner or myself and that the statements given are true to the best of my knowledge. Please return this permit to the Planning Department in person along with a \$100.00 fee.					
Signature of Applicant Date					
Signature of Landowner (if applicable) Date					
To be completed by the Planning Department.					
Granted Denied Comments:					
Planning Department:	Date				
NCDOT Approval Yes No	Rev'd				
Chatham County Environmental Health Approval Yes No	Rcv'd				
Chatham County Building Inspections Approval Yes No Chatham County Fire Marshal Approval Yes No	Rcv'd				
Chatham County Frie Marshar Approval Tes No	Rev'd				
Chatham County Stormwater Approval Yes No	Rev'd				