



City of Weed

550 Main Street
P. O. Box 470
Weed, CA 96094

(530) 938-5020
(530) 938-5096 (FAX)

HOME OCCUPATION APPLICATION AND PERMIT **FEE \$75.00**

Regulation for Home Occupation Permit (Section 18.08.250 and 18.24.240 of the Weed Municipal Code):

"Home occupation" means an operation conducted on the premises by the occupant of the dwelling as a secondary use in connection therewith, and where there are no advertising signs, no display, no connection therewith and no mechanical equipment designed to be used in connection therein, other than that necessary or convenient for domestic purposes.

Home occupations may be engaged in provided that the same is only incidental and secondary to the use of the single-family residence as residential purposes and provided further that the type of home occupation has been approved by the City Manager. The City Manager, in approving the home occupation, shall not authorize any use which would change the residential character of the residence or would be detrimental to the surrounding community and the public health, safety and welfare. In determining whether a home occupation conforms with the foregoing criteria, the City Manager must determine the existence of the following conditions:

- A. There shall be no employment of help other than the members of the resident family.
- B. There shall be no use of material or mechanical equipment not recognized as being part of normal household or hobby uses.
- C. The use shall not generate pedestrian or vehicular traffic or noise or electronic interference beyond that normal to the zone in which it is located.
- D. There shall be no excessive, unsightly, or hazardous storage of materials, supplies, or equipment, indoors or outdoors.
- E. It shall not involve the use of signs or structures other than those permitted in the zone of which it is a part.
- F. Not more than one (1) room in the dwelling shall be employed by the home occupation, nor more than one outbuilding.
- G. In no way shall the appearance of the structure be so altered or the conduct of the occupation within the structure be such that the structure may be reasonably recognized as servicing a non-residential use.
- H. The granting of a permit for home occupations does not exempt the permittee from the State and local regulations regarding the business licenses, sales tax permits, and professional restrictions.

I. GENERAL DATA REQUIRED

A. Name of Applicant (Please Print): _____

B. Address or Location of Property: _____

C. Assessor's Parcel Number(s): _____

D. Site Area (acres/sq. ft.): _____

E. Current Zoning: _____ F. Existing Use of Property: _____

H. Description of Proposal: _____

(continue on separate sheet if necessary)

II. APPLICANT INFORMATION

A. APPLICANT: In signing this application, I, as applicant, represent to have obtained authorization from the property owner to file this application. I agree to be bound by conditions of approval, subject only to the right to object at the hearings on the application or during the appeal period. If this application has not been signed by the property owner, I have attached separate documentation of full legal capacity to file the application. I certify that the information and exhibits submitted are true and correct. I understand that my business license can be revoked or denied if found to be in violation of any of the regulations.

Name (Pls. Print): _____ Daytime Telephone: _____

Business Name: _____

Address: _____

City: _____ Zip: _____ E-mail: _____

Signature: _____ Date: _____

III. AUTHORIZATION AND CONSENT OF PROPERTY OWNER

A. PROPERTY OWNER: In signing this application, I, as property owner, have full legal capacity to, and hereby do, authorize the filing of this application. I understand that conditions of approval are binding and agree to be bound by those conditions, subject only to the right to object at the hearings or during the appeal period. I hereby certify that the facts, statements, and information presented within this application form are true and correct to the best of my knowledge and belief. I hereby understand and certify that any misrepresentation or omissions of any information required in this application form may result in my application being delayed or not approved by the City. I hereby certify that I have read and fully understand all the information required in this application form. I further agree and grant authorization to enter said property to the City for the limited purpose of examining the property with respect to the proposed project/land use. Further, I do do not agree and grant authorization to State and federal agencies to enter said property for the limited purpose of examining the property with respect to the proposed project/land use. The authorization is valid from the date of this application until the date of project determination or withdrawal. In applying for this application(s), I also agree to diligently process and complete all requirements necessary for said application(s) to be considered complete and ready for processing and I hereby do agree that failure to do so in accordance with City Code constitutes an abandonment of said application(s) and my desire to withdraw said application(s).

I FURTHER AGREE TO DEFEND, INDEMNIFY AND HOLD HARMLESS CITY OF WEED, ITS AGENTS, OFFICERS AND EMPLOYEES FROM ANY LEGAL CHALLENGE RESULTING FROM THIS APPLICATION. I FURTHER STIPULATE THAT IF I FAIL TO COMPLY WITH ANY CONDITIONS ATTACHED TO CITY APPROVAL I AGREE AND CONSENT TO THE CITY RESCINDING ANY AND ALL APPROVALS THAT ARE SUBJECT TO THIS APPLICATION. I CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND WMC 18.08.250 AND 18.24.240 REGARDING HOME OCCUPATION PERMIT.

Name (Pls. Print): _____ Daytime Telephone: _____

Address: _____ Fax: _____

City: _____ Zip: _____ E-mail: _____

Signature: _____ Date: _____

For City use only:

Hearing Date: _____

Application is: Approved

Denied

Date: _____

City's Manager

*****If an applicant will need more than one owner signature, copy and paste the below into the app and print. *****

Name (Pls. Print): _____ Daytime Telephone: _____

Address: _____ Fax: _____

City: _____ Zip: _____ E-mail: _____

Signature: _____ Date: _____