

Date: _____

WEST BRANDYWINE TOWNSHIP
198 LAFAYETTE ROAD, WEST BRANDYWINE, PA 19320
(610) 380-8200 www.wbrandywine.org

HOME OCCUPATION APPLICATION

- 1. _____ Minor Home Occupation
- 2. _____ Major Home Occupation

The Zoning Ordinance allows the operation of businesses from residences only after a review by the Zoning Officer to determine if the proposal satisfies the regulation established in §200-90 of the West Brandywine Township Code and regulated by the provisions set forth for each. All questions must be answered in full.

(Please Print)

APPLICANT INFORMATION:

Name: _____
Address: _____
City, State, Zip: _____
Telephone: _____ Cell/Other _____
E-Mail Address: _____

OWNER INFORMATION (if other than applicant):

Name: _____
Address: _____
Telephone: _____ Cell/Other _____
Email Address: _____

PROPERTY INFORMATION:

Site Address: _____
Tax Parcel #: 29- _____ Square Footage of Dwelling Unit: _____

PROPOSED USE:

- Minor Home Occupation Major Home Occupation

Nature of your business: _____

Business Name (if applicable) _____

Square Footage Devoted to Business Use: _____

Date: _____

QUESTIONS

NO. PER DAY

- Will you have customers or clients visit your business? No If yes: _____
- Will you have non-family employees on-site? No If yes: _____
- Will you have non-family volunteers on-site? No If yes: _____
- Will you have independent contractors on-site? No If yes: _____
- Will you have deliveries made to you on-site? No If yes: _____
- How will deliveries be made? No If yes: _____
- Will you conduct direct sales of products or services on-site? No If yes: _____
- Will you erect a sign? (If yes, attach plan of sign) No If yes: _____
- Do you have a business vehicle(s)? No If yes: _____
- Does your vehicle(s) have a sign attached? No If yes: _____
- How will you advertise your business? _____
- What are your hours & days of operation? _____
- Does your business require a license or permit from any Federal, state, or county agency? Yes No _____

Please list all vehicles and equipment associated with your business:

<u>Vehicles</u>	<u>Number</u>	<u>Vehicular Weight</u>

List any other businesses operated from the property:

Type of Residence: Single Family Detached Multi-Family Dwelling

This application must be accompanied by the following:

- Plot plan of property showing all structures
- Plan showing proposed sign location
- Floor plan of the building used for the business purpose, with business space clearly delineated.
- Copy of required permits or licenses from outside agencies.

Engineered plans are not required; however the plan must include sufficient detail so that the Township can determine if the requirements for the proposed use have been met.

Date: _____

Certification

I hereby certify that the owner of record authorizes the proposed use. Furthermore, I have been authorized by the owner to make this application, and I agree to conform to all applicable requirements related to the proposed use. This application has been examined by me and to my knowledge and belief is a true, correct and complete application.

By action of applying for a permit, the applicant grants permission for the Zoning Officer or such other Township Official, to inspect the property prior to the issuance of a permit and during the conduct of the proposed use.

Owner Signature: _____

Name (Print): _____

Date: _____

Applicant Signature: _____

Name (Print): _____

Date: _____

OFFICIAL USE ONLY

Classification of Use:

Minor Home Occupation

Major Home Occupation

Prohibited

APPROVAL:

YES

NO

Comments:

Zoning Officer Signature _____ Date: _____

Permit No.: _____