

HOME OCCUPATION PERMIT APPLICATION FORM

Fee: See Fee Schedule. (includes 9% Overhead Fee)

Processing Time: Over the counter

Please fill out the **General Application Form** as well.

The General Application Form, combined with this Form, would become the Home Occupation Permit, if approved.

Dus	iness De	escription	on:	
be I neig be u app with and neig Zon	ocated and ghbor, und inaware of lied are in n other per preserve t ghborhood ning Ordin	d conducter normal its presentended to emitted use the resider of the conduction of	home occupation shall ed such that the average circumstances, would nce. The standards insure compatibility es in residential areas ntial character of the Petaluma Implementing etion 7.050) Please pro operates fr	vide specific details on how your business from home:
1.	□ Yes	□ No	involve any of the following?	nore section). (Ord. 19623 N.C.S., 10/94
	□ Yes	□ No	Will the business be conducted primarily within the main dwelling?	
2.	_	ny yard space or outside area?		
 3. 	☐ Yes			

4.	⊔ Yes	⊔ No	Will you be storing equipment/supplies outside of your home?	
			If so, what will you be storing and where?	
5.	□ Yes	□ No	Do you plan to use your garage for business purposes or storage?	
			If garage space will be used for storage, please state: The number of bedrooms and accessory dwelling units exist on your property: The number of parking spaces still available on your property:	
6.	□ Yes	□ No	The home occupation shall not be identifiable from the property line by any means including, but not limited to, sight, noise, light, smoke, and traffic, parking demand, odor, vibration, electrical interference, dust, glare, liquid or solid waste. A person standing just beyond the boundary line of the property should not be aware of the home occupation, excepting a sign as permitted by Section J. Does your business conflict with this requirement?	
7.	□ Yes	Will you be using your personal vehicle for business purposes?		
			If yes, what kind of vehicle do you have?Please note: the vehicle must be non-commercial, 3/4 ton or less.	
8.	□ Yes	□No	Do you intend to make any internal or external alterations to your home for the purposes of this home occupation?	
9.	□ Yes	□ No	Do you intend to have employees other than yourself? If so, how many employees live at this residence? How many employees live elsewhere from this residence?	
10.	□ Yes	□ No	Are articles for sale produced off-premises?	
11.	□ Yes	□ No	Do you act as an intermediary between off-site suppliers and customers?	
	□ Yes	□ No	If so, are any items for sale received, stored, or sold on the premises? (not including samples)	
12.	□ Yes	□ No	Will you see customers/clients at your home? If so please state:	
			Frequency of visits: Per day Per week Per month	
13.	□ Yes	□ No	Will you be receiving business related deliveries at your home?	
			Frequency of deliveries: Per day Per week Per month	
14.	□ Yes	□ No	Do you intend to advertise this business?	
	Applicant's initials		If so, please initial to acknowledge that NO advertising shall be used which informs the public of the address of the home occupation (business cards and stationary letterhead excluded).	

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Hours: 8 am - 5 pm

Mondays through Thursdays. Closed Fridays

Last updated: December 14, 2017

15.	□ Yes	□ No	Do you intend to have a sign	advertising your business?	
	Applicant's initials		If so, please initial, stating that you understand the following: A non-illuminated identification sign of not more than 1-1/2 square feet in area may be placed flat agains an outside wall of the house, which may be used to identify the occupant and the home occupation.		
16.	□ Yes	□ No	Have you filled out the Gene	eral Application Form?	
17.	□ Yes	□ No	Have you provided payment (Note: Paying by check or cash	with the application? avoids a credit card transaction fee).	
Acl	knowled	lgemen	t Required		
Rev	ocation of	Permit:			
in cocond amendone one Prop The signal	ompliance litions of a nd operatice occupation (1) year from the control of the c	with the papproval, on al condition at that om the date of the condition at the condition a	provisions of this permit. If the the Planning Manager shall have litions. Once a home occupation is location is no longer permitted atte of revocation. Atture Required: Equires the property owner's sign by that the property owner has been property, as outlined in the	shall determine whether the subject home occupation is use is found not to be in full compliance with the we cause to suspend or revoke the zoning permit or in permit has been revoked, continued practice of the d and subsequent applications shall not be filed within separature when issuing a Home Occupation Permit. This peen informed of the operational characteristics of the Home Occupation Permit on the previous pages. The con from the Sonoma County Tax Assessor's office. If	
•				quire documentation to verify ownership.	
 Prop	erty Own	er's Signa	ture	Date	
			ove business description is true lementing Zoning Ordinance	and correct; and (b) that I understand and agree to abide Section 7.050.	
App	licant's Sig	gnature		Date	
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