

City of Sonoma

Planning and Community
Development
No. 1 The Plaza
Sonoma, CA 95476



Home Occupation Permit Rev. 02/25/22

Phone: (707) 938-3681 Fax: (707) 938-8775 E-mail: cityhall@sonomacity.org Web: www.sonomacity.org

Business License No. _____

NAME: _____ DATE _____

ADDRESS: _____

BUSINESS NAME: _____

BRIEFLY DESCRIBE THE HOME OCCUPATION:

CONDITIONS OF APPROVAL:

Your Home Occupation is subject to the following Conditions of Approval (sections 19.50.030 to 19.50.100, Sonoma Municipal Code):

1. The Home Occupation shall only be performed or operated within the confines of the residence. Access to the space devoted to the Home Occupation shall be from within the residence.
2. Employees of the Home Occupation, other than those living in the residence, are prohibited.
3. The Home Occupation shall not result in the installation of any equipment or facilities, which are not normally incidental to a residential use.
4. There shall be no visible evidence of the Home Occupation from the exterior of the residence, nor any impairment of the interior are where the Home Occupation is conducted.
5. There shall be no advertising of the Home Occupation visible from the exterior of the residence.
6. The Home Occupation shall not generate pedestrian or vehicular traffic substantially greater than that normally associated with residential uses in that area.
7. The Home Occupation shall be conducted so as not to cause offensive or objectionable noise, vibration, smoke, odors, humidity, heat, cold, glare, dust, dirt, or electrical disturbance, which is perceptible by the average person at or beyond any property line of the lot containing the Home Occupation.
8. The applicant must secure a Business License from the City of Sonoma (section 5.04.040, Sonoma Municipal Code).

PLEASE NOT: ALL HOME OCCUPATIONS THAT SERVE THE PUBLIC ARE REQUIRED TO PROVIDE DISABLED ACCESS. CHECK WITH THE CITY'S BUILDING OFFICIAL FOR MORE INFORMATION.

I Agree: to operate the Home Occupation as described above, and in accordance with the Conditions of Approval

Signature: _____

(APPLICANTS WHO ARE NOT PROPERTY OWNERS MUST ATTACH WRITTEN APPROVAL TO THE HOME OCCUPATION FROM THE PROPERTY OWNER OR RESIDENT MANAGER).

Approved By: _____ Date: _____