

Permit Number: \_\_\_\_\_

Map #: \_\_\_\_\_

Township: \_\_\_\_\_

Parcel #: \_\_\_\_\_

## APPLICATION FOR CUSTOMARY HOME OCCUPATION

\_\_\_\_\_ Customary Home Occupation Permit  
(Type I & II)

\_\_\_\_\_ Customary Home Occupation  
Conditional Permit (Type III)

### Applicant

### Owner

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_

Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Address of Property \_\_\_\_\_

Zone District \_\_\_\_\_ 1/4 \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_

### General Requirements

1. No home occupation shall be permitted without the prior issuance of a Home Occupation Permit or Home Occupation Conditional Use permit.
2. The total number of home occupations conducted within a dwelling unit is not limited, except that the cumulative impact of all home occupations conducted within the dwelling unit or on the premises thereof shall not be greater than the impact allowed for one home occupation.
3. Conditional Use Permits granted by the Board of Zoning Appeals shall be temporary in nature, and shall be granted to a designated person who resides at a residential address. They are not transferable from person to person or from address to address.
4. Should a Home Occupation Permit holder or Conditional Use Permit holder die or move to a new location, the existing permit shall be automatically terminated. In the case of death, should a surviving spouse or child residing at the same address desire to continue the home occupation written notice to that effect shall be given to the Director of the Area Plan Commission who may authorize continuation of that permit without further hearing.
5. Permits and Conditional Use Permits, once granted, may be revoked by the Area Plan Office for cause after a hearing (for the revocation) by the Board of Zoning Appeals. Complaints seeking the revocation of such permit shall be filed with the Director of Area Plan may be initiated by the Area Plan Office or any two residents of the block (both sides of the street where the home occupation is being conducted).
6. The following uses by the nature of the investment or operation have a pronounced tendency once started to rapidly increase beyond the limits permitted for home occupations, thereby, impairing the use and value of a residentially zoned area for residential purposes and are more suited to commercial or

industrial districts. Therefore, the uses specified below shall not be permitted, by any means or hearing, as home occupations.

- a) Major auto repair
- b) Painting vehicles, trailers, or boats
- c) Funeral chapel or home
- d) Gift Shops
- e) Medical or dental clinic
- f) Rental business including but not limited to video, home entertainment, equipment, tools, etc.
- g) Photo studios
- h) Welding or machine shops
- i) Warehousing and Distribution
- j) Car sales

### **Customary Home Occupation Questions**

- | <b><u>Yes</u></b>        | <b><u>No</u></b>         |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Have you ever obtained a Customary Home Occupation Permit from the Area Plan Office?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you ever obtained a Customary Home Occupation Conditional Permit from the Board of Zoning Appeals through a Special Exception?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Does the applicant reside at the dwelling unit for which the home occupation permit is being requested? <i>This is <b>required</b> for all CHO Types.</i>  |
| <input type="checkbox"/> | <input type="checkbox"/> | Will Customary Home Occupation (CHO) be operated entirely within the applicant's dwelling? <i>If yes, Type I CHO; if no, Type II CHO or Type III</i>   |
| <input type="checkbox"/> | <input type="checkbox"/> | Will the CHO operate entirely within an accessory structure? <i>If yes, Type II CHO.</i>   |
| <input type="checkbox"/> | <input type="checkbox"/> | Will the CHO use more than twenty-five (25%) percent of the floor area of the dwelling unit used for human occupancy for the home occupation? (The floor area may include a finished basement, finished attic or attached garage). <i>If yes, Type III CHO</i> |
| <input type="checkbox"/> | <input type="checkbox"/> | Will the CHO use more than one thousand – five hundred (1,500) square feet of an accessory building or garage? Total Area _____  |
| <input type="checkbox"/> | <input type="checkbox"/> | Will the CHO involve the use or storage of tractor trailers, semi-trucks, or heavy equipment such as construction equipment used in a business? <i>If yes, this is a Type III CHO, and may require variances.</i>  |
| <input type="checkbox"/> | <input type="checkbox"/> | Will CHO employ more than one person in addition to those who are permanent residents of the dwelling unit in which the home occupation is conducted? <i>If yes, Type III CHO</i>  |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be any employees come to the site at any time to receive instructions for the day, week, month, or year? <i>If yes, this is Type III CHO</i>  |

- Will any of the employees come to the site to do any administrative work for the business? *If yes, Type III CHO*
- Do you use your dwelling as an office for business administration activities for work/jobs completed off the premises? *If yes, Building Trades CHO*
- Is there any wholesale or retail business being conducted? *If yes, Type III CHO*
- Will the wholesale or retail business be conducted entirely by mail? *If no, Type III CHO.*
- Will it involve the sale of merchandise other than sales of products or goods produced or fabricated on the premises? *If yes, Type III CHO.*
- Will the CHO produce any noxious matter or perceptible noise? *If yes, this is **NOT** a CHO.*
- Will there be toxic, explosive, flammable, combustible, corrosive, etiologic, radioactive, or other restricted materials used or stored on the site *If yes, this is **NOT** a CHO*
- Will there be any alterations of the residential appearance, including creation of a separate entrance to the dwelling? *If yes, Type III CHO.*
- Has a recent addition been on the home for at least one year before home occupation is applied for? *If no, Type III CHO.*
- Will there be a Commercial telephone directory listing, radio, or television service, used to advertise the **location** of a home occupation to the general public? *If yes, Type III CHO*
- Will there be more than one vehicle utilized in the business? *If yes, Type III CHO*
- Will there be commercially licensed vehicles utilized in the business? *If yes, Type III CHO*
- Will there be retail sales of products or goods produced or fabricated on the premises? *If yes, Type I or II CHO.*
- Will there be a freestanding sign larger than 3 square feet but less than 6 square feet in area? *If yes, Type II CHO*
- Will the freestanding sign be larger than 6 square feet in area? *If yes, Type III CHO*
- Will there be parties (more than twice a month) for the purpose of selling merchandise or taking orders? *If yes, Type III CHO.*
- Will one (1) additional off-street parking space be provided for the home occupation? (The required parking space may not be in the required front, side, or rear yard setbacks.) *If no, Type III CHO.*
- Will there be storage of goods, materials, or products connected with the home occupation? *If yes, Type III CHO.*

- Will there be materials, which decompose by detonations? *If yes, Type III CHO.*
- Will there be additional points of access to any street, road, or highway? *If yes, Type II CHO*
- Will there be any on-site sales or training promotions? *If yes, this is Type III CHO*

**This application must be accompanied by the following:**

- **Legal description**
- **Detailed site plan drawing with:**
  - **All building dimensions (any additions, if applicable)**
  - **Lot size**
  - **Parking areas with size, spaces, flow pattern, and drive aisles**
  - **Location of proposed CHO and size of area used for**
- **Typed description of type of business, proposed hours, estimated number of clientele, and any other significant or requested information.**

I have read this application in its entirety and have determined that I would fall under the guidelines of a **Type** \_\_\_ Home Occupation. I do hereby verify by signing this application that I meet the guidelines of a **Type** \_\_\_\_\_ **Home Occupation**. I am aware that if any of these restrictions are violated, it will result in a revoking of this permit and/or possible fines.

Title Holder Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Print

Occupant/Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Print

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(For Office Use Only)

Reviewed and Approved by \_\_\_\_\_ Date \_\_\_\_\_

Fee \_\_\_\_\_ Receipt Number \_\_\_\_\_