

HOME OCCUPATIONAL LICENSE QUESTIONNAIRE

DATE_____

APPLICANT_____

ADDRESS_____

PHONE NO._____

DO YOU OWN SUBJECT PROPERTY? Yes_____ No_____

TYPE OF HOME OCCUPATION PROPOSED_____

1. Provide a detailed description of the proposed home occupation including the method of operation, scope of operation, materials and equipment involved and any other information that would describe the home occupation.

2. How many persons are involved in the home occupation?_____

3. What will the hours of operation be? From_____ To_____

4. Describe any alterations, both to the interior and exterior of home, that are proposed.

5. Describe the mechanical and/or electrical equipment that will be necessary to conduct the proposed activity.

6. Will people come to your residence to obtain services and/or products? Yes_____ No_____ If yes, what do you estimate to be the number, the time of day, and the length of stay for those individuals?

7. How much off-street parking will be provided on the site?

8. If a sign is to be used, indicate the size, the location and information to be provided.

9. Is your home occupation in conformance with all existing covenants and restrictions applicable to your property? Yes_____ No_____ If No, explain.

10. I have read all pertinent sections of Section 2.12 of the Official Zoning Ordinance of the City of Minden which apply to home occupations and believe that my proposed home occupation complies with all conditions of the Code and if my home occupation is approved, I further agree to meet all statements made by me in this document.

APPLICANT'S SIGNATURE_____