

## HOME USE OCCUPATION APPLICATION

For anyone wishing to operate a home based business for compensation, which houses inventory, and/or generates additional traffic within the neighborhood. There are some occupations that do not require a permit such as Home Retail Parties (Tupperware, Pampered Chef, Jewelry, etc), Daycares, telemarketing, computer based businesses that do not have public coming to the home, or businesses that are conducted via phone/email.

All home occupation permits require a public hearing and must be renewed every 3 years.

A pre-application for home occupation permits is required before completing a full application.

PLEASE READ BEFORE COMPLETING. ONLY COMPLETE APPLICATIONS WILL BE ACCEPTED!

Applications must be completed, returned to City Hall, AND APPROVED before any construction can begin. Please see instructions on the back of this form.

If you are remodeling your home or changing the footprint of your property to accommodate the Home Use Occupation you must complete a Land Use Permit application and/or a Building Permit application.

### PRINT OR TYPE

1. PROPERTY LOCATION (Street Address and Legal Description): \_\_\_\_\_

Lot# \_\_\_\_\_ Block# \_\_\_\_\_ Division \_\_\_\_\_

2. APPLICANT NAME: \_\_\_\_\_

OWNER'S NAME (If Different): \_\_\_\_\_

ADDRESS (Mailing): \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE (Home): \_\_\_\_\_ (Business): \_\_\_\_\_

3. BRIEF DESCRIPTION OF HOME USE OCCUPATION (Attach separate sheet, if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. IS YOUR BUSINESS FILED WITH THE STATE OF MINNESOTA AND IS ACTIVE: \_\_\_\_\_ YES \_\_\_\_\_ NO

Please attach a copy of active status with the State of MN

5. WILL THE PUBLIC BE COMING TO YOUR HOME: \_\_\_\_\_ YES \_\_\_\_\_ NO

6. WILL YOU BE STORING INVENTORY: \_\_\_\_\_ YES \_\_\_\_\_ NO

7. DOES THE OCCUPATION REQUIRE 20% OR MORE OF THE SQ.FT. OF THE HOME: \_\_\_\_\_ YES \_\_\_\_\_ NO

8. WILL THERE BE A SIGN REQUIRED FOR THE BUSINESS: \_\_\_\_\_ YES \_\_\_\_\_ NO

9. WILL THERE BE MORE THAN 2 EMPLOYEES (not including owners): \_\_\_\_\_ YES \_\_\_\_\_ NO

10. WILL THE OCCUPATION CREATE NOISE, GLARE, LIGHT, VIBRATIONS, FUMES, OR ODORS: \_\_\_\_\_ YES \_\_\_\_\_ NO

11. WILL YOU REQUIRE COMMERCIAL VEHICLES FOR DELIVERY OR PICKUP: \_\_\_\_\_ YES \_\_\_\_\_ NO

12. WHAT DAYS AND HOURS WILL YOU CONDUCT BUSINESS: \_\_\_\_\_

13. WILL THERE BE EQUIPMENT THAT CREATES ELECTRICAL INTERFERENCE: \_\_\_\_\_ YES \_\_\_\_\_ NO

What type of equipment will be used: \_\_\_\_\_

14. WILL YOU BE BUILDING/REMODELING HOME FOR YOUR BUSINESS: \_\_\_\_\_ YES \_\_\_\_\_ NO

Explain: \_\_\_\_\_

*A building permit and land use permit may be required.*

I hereby certify that I am the owner or authorized agent of the owner of the described property, representative of the existing conditions on the property. I understand this request will result in public notification process and hearing conducted in accordance with Minnesota Statutes. I consent to site visits by City representatives prior to the hearing. I understand further that falsifications of this application or any attachments thereto will serve to make this application and any subsequent permit invalid.

**By signing this application I do hereby certify that all the information is complete an accurate. I further certify that there are no delinquent property taxes, special assessments, penalties, interest or municipal utility fees due on the parcel to which the application relates on the above stated property.**

APPLICANT(S) SIGNATURE(S): \_\_\_\_\_

PROPERTY OWNER'S SIGNATURE: \_\_\_\_\_

Is proof of ownership attached (I.E. the recorded deed)? Yes \_\_\_\_\_ No \_\_\_\_\_

DATE: \_\_\_\_\_

APPLICATION FEE (\$100.00): \_\_\_\_\_  
("After the fact" fee = \$200)

**DO NOT WRITE BELOW THIS LINE**

DATE FILED: \_\_\_\_\_

PROPERTY CURRENTLY ZONED: \_\_\_\_\_ EXEMPT FROM BUILDING PERMIT Yes No

ZONING ADMINISTRATOR: Approved Denied Sent to Public Hearing  
SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

REASON DENIED: \_\_\_\_\_

ZONING COMMISSION: Approved Denied SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

CITY COUNCIL: Approved Denied SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

OCCUPATION START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_