HOME OCCUPATION APPLICATION

City of Danville

(PLEASE PRINT)

Applicant's Name: _____ **Applicant's Phone #:** _____

Business Name: _____
(if different from above)

Address of Business: _____

Description of Business Activity: _____

_____

PLEASE ANSWER ALL THE FOLLOWING QUESTIONS BY CIRCLING YES OR NO.

1. Will the business activity be the primary use of the property? YES NO
2. Will the business activity be conducted outside in the yard, patio, or an open courtyard? YES NO
3. Will the exterior of the dwelling be altered in any way to accommodate the business activity? YES NO
4. Will there be evidence of the business activity, such as noise, dust, or odors emitted from the premises? YES NO
5. Will there be stocks of merchandise sold, displayed, or manufactured on this property? YES NO

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6. Will anyone other than persons living at the residence be working at the business on this property? YES NO
   a.) If yes, how many? _____
7. Will any customers or clients be coming to the property in connection with the business activity? YES NO
8. Will more than one room of the dwelling unit be used to conduct the business? YES NO
9. Will there be a sign on the property relating to this business? YES NO
10. Will the business activity generate additional vehicular traffic? YES NO
    a.) If yes, approximately how many vehicles a day? ____

_____ _____
Applicant's Signature **Date**

_____ _____
Zoning Administrator **Date**