## ZONING HOME BASED BUSINESS/OCCUPATION QUESTIONAIRE

Use this form to explain a request for a home occupation or accessory use of you home. Definition of and permitted and conditional locations for home occupations are available in the St Johnsbury Subdivision and Zoning Ordinance located in their entirety on our website <u>www.stjvt.com</u>.

Name of Business Proposed: \_\_\_\_\_

Type of Business Proposed: \_\_\_\_\_

Provide a detailed description of the proposed Home Occupation such as: activities involved; materials and equipment used; quantities of materials and equipment stored on-site; methods of operation; hours of operation. This may be done on a separate piece of paper and attached.

## Please respond to the following:

1. How many persons will be involved or employed in the conduct of the proposed Home Occupation:

Residents of premises: \_\_\_\_\_ Others Total Number \_\_\_\_\_

- What type of product will be produced, serviced, or repaired in the conduct of your Home based business? For example: Childcare, repair of clocks or watches, making jewelry, bed and breakfast, caterer, etc. Explain\_\_\_\_\_\_
- 3. Describe any alterations to the home or premises that might be required to facilitate your business:
- 4. Describe what rooms will be used in conducting the Home based business and how these rooms will be used. (For example: garage will be used to store supplies; or den will contain desk and file cabinets, etc.). Indicate the gross floor area(s) that will be used to conduct your business. Indicate the total gross floor areas of your house and include any accessory structure(s) to be used for the Home Occupation, (Ex. Garage).
- 5. Describe any additional mechanical and/or electrical equipment that will be necessary to conduct your business activity:
- 6. Describe how, where and in what amounts the material, supplies and/or equipment related to your Home based business will be displayed or stored:
- Will people come to your home to obtain any product or to use any service connected with the proposed Home business activity? Yes \_\_\_\_\_ No \_\_\_\_\_
  If yes, please explain in detail:

- 8. Are any signs necessary or proposed relative to the Home based busines? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, you are required to file for a Sign approval and permitting. An application form can be obtained at the Planning and Zoning Office or on our website.
- 9. If trucks or other equipment will be used in conjunction with your home based business, where will they be parked or stored?

- 10. Will the business involve the use of commercial vehicles for delivery of materials to or from the premises? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: \_\_\_\_\_\_
- 11. How many parking spaces will be provided for the business? \_\_\_\_\_\_

Where will they be located? Indicate parking spaces on a site plan of this property as part of your application.

12. Is your proposed business in conformance with the conditions, covenants and restrictions pertaining to your property? Yes \_\_\_\_\_ No \_\_\_\_\_

We suggest checking your mortgage and deed for conditions, covenants and restrictions.

I have read and understand Town of St Johnsbury Subdivision and Zoning Ordinance as well as the Town Civil Ordinance and believe that, to the best of my knowledge, my proposed Home based business would not violate any portion of said Ordinance:

Applicant's Signature:	Date:
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Property Owner's Signature: \_\_\_\_\_\_ Date: \_\_\_\_\_\_

ZONING ADMINISTRATION OFFICE USE ONLY			
Reviewed by: _			Date:
District	Home Occupation permitted	Conditional	Variance