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HOME OCCUPATION APPLICATION UPDATED JUNE 24, 2008

Applicant & Home Occupation Information

Project name: _____

Property owner: _____

Address: _____

Phone: _____ Fax: _____ Cell: _____

Authorized agent: _____

Address: _____

Phone: _____ Fax: _____ Cell: _____

E-mail address: _____

Location or address of the proposed Home Occupation: _____

Hours of Operation: _____ Number of non-family employees: _____

Total Square footage of the residence: _____ Sq. ft. occupied by the occupation: _____

Please describe the proposed Home Occupation: _____

Chapter 19.08 of the City Development Code also contains specific criteria that the City staff and the Planning Commission will use in determining whether or not your Home Occupation application is complete, if it can be authorized and what special requirements or conditions may be imposed upon a Home Occupation.

Supporting Materials

Please attach to your application the following materials that are necessary for a complete submittal:

1. Sketches. The applicant must provide five reduced (11" by 17") sketches drawn to scale of: the floor plan of the home, area to be devoted to the occupation and off-street parking.
2. Fire Extinguishers. Evidence of a number 5 class 2A 10 BC fire extinguisher or the proper extinguisher required by the Fire Code.
3. Professional Licenses. If applicable, the applicant must submit a copy of professional licenses to legitimize the home occupation.
4. Signage. If any, the applicant must submit a sketch of the proposed signage and identify the location of the signage.
5. Fee. The processing fee of \$250.00 for a staff review or \$350.00 for a Planning Commission review shall be submitted.

Applicant Certification

I certify under penalty of perjury that this application and all information submitted as a part of this application are true, complete and accurate to the best of my knowledge. I also certify that I am the owner of the subject property and that the authorized agent noted in this application has my consent to represent me with respect to this application. Should any of the information or representations submitted in connection with this application be incorrect or untrue, I understand that The City of Saratoga Springs may rescind any approval, or take any other legal or appropriate action. I also acknowledge that I have reviewed the applicable sections of the Saratoga Springs Land Development Code and that items and checklists contained in this application are basic and minimum requirements only and that other requirements may be imposed that are unique to individual projects or uses. Additionally, I agree to reimburse the City of Saratoga Springs all amounts incurred by the City in excess of the base fee required by the Consolidated Fee Schedule to review and process this submitted application and agree to comply with Resolution No. 99-01218-01. I also agree to allow the Staff, Planning Commission, or City Council or appointed agent(s) of the City to enter the subject property to make any necessary inspections thereof.

Property Owner's Signature: _____ Date: _____