

City of North Branch Home Occupation Permit



PROPERTY OWNER(S) NAME(S) (SIGNATURE REQUIRED)	BUSINESS PHONE () -	HOME PHONE () -
PROPERTY OWNER ADDRESS	CITY	STATE ZIP
LEGAL DESCRIPTION (Lot/Block/Plat or Section Number) Lot: Block: Section: If metes & bounds, attach a copy of exact legal desc.	ASSESSOR PARCEL NO	ZONING

DESCRIPTION OF AND/OR REASON FOR REQUEST AND INTENDED START DATE:

Please answer the following questions and explain your answers:

Where will the business be operated from?	Will the business use be secondary to the use as a home? (Will the home still be the primary use of the property?)	Will the outside appearance of the property/house change?
Will any goods/materials be sold on the parcel?	Will there be any outdoor storage?	Will there be additional traffic to the area?

PROPERTY OWNER/APPLICANT CONSENT X _____
 I declare under penalty of perjury that I am the owner of said property or have written authority from property owner to file this application. I certify that all of the submitted information is true and correct to the best of my knowledge and belief. I understand that any misrepresentation of submitted data may invalidate any approval of this application.

Public Hearing needed? Yes / No	Date of Hearing if needed _____
Fee: \$100 - Admin Review Only \$300 - Public Hearing Receipt # _____	Date _____
Approved: Yes / No Approval Signature _____	Date _____