TOWN OF WINDSOR



APPLICATION FOR HOME OCCUPATION PERMIT

Fee: \$ 25.00

(in accordance with the current Fee Schedule)

	Name			Business Title				
Applicant	Business Legal Name			Doing Business As (DBA)				
Information	Mailing Address			City/State		Zip Code		
	Email			Phone				
Property	Owner Na	ame	Owner Phone		Owner Email			
Information	Address	dress		City/State		Zip Code		
Proposed Use								
Total Gross Floor A	area of the I	Owelling ¹	Gross Flo	Gross Floor Area of the Existing Home Occupation (if any)				
Gross Floor Area of the Proposed Home Occupation			Cumulativ	Cumulative Percentage of All HOC Areas				
Authorized Agent(s) (Requires	additional Affidavit)						
		Information to l	e Complet	ed by Staff				
GPIN		Zoning District	Acreage	-	Magisteri	al District		

¹ The sum of total horizontal areas of the several floors measured from the interior faces of exterior walls.

This certificate represents zoning approval to conduct the Home Occupation identified above.

- 1. No employees shall be permitted to work on the premises, except for family members residing in the dwelling and/or up to two employees other than immediate members of the family residing on the premises may be employed on the premises. Employees are individuals, members of a partnership, limited liability company and members and officers of a corporation and business trust associated with a business activity conducted within a dwelling unit.
- 2. Operation does not generate excessive traffic or produce obnoxious odors, glare, noise, vibration, electrical disturbance, radioactivity, or other conditions detrimental to the character of the surrounding area
- 3. The operation must be conducted entirely within a dwelling unit (not in any accessory structure, i.e., detached shed/garage) by the residents of that unit which is clearly incidental and secondary to the principal use as a dwelling unit.
- 4. The area devoted to the home occupation shall not exceed 50 percent (50%) of the gross floor area of the dwelling unit.

I hereby apply for approval to conduct the Home Occupation identified above and certify that this address is my legal residence. I have read, understand, and will abide by the above conditions and restrictions on Home Occupations. This approval is based solely on the information provided herein. If such information should be proven inaccurate at a later date, approval will be considered invalid.

Applicant Signature (Requi	red)		_
Signed this	day of	,	
Property Owner Signature (Re	quired)		
Signed this	day of	,	