



HOME OCCUPATION APPLICATION

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Mountlake Terrace, WA 98043
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PermitSpecialist@ci.mlt.wa.us
www.cityofmlt.com

Permit # _____

Business License Application
Submittal Date: _____

Site Address _____

Description of Proposal _____

APPLICANT AND CONTACT INFORMATION

Name _____

Address _____

Phone _____ Fax _____ E-mail _____

If different from above

Contact Name _____

Phone _____ Fax _____ E-mail _____

Please answer the following questions:

1. Do you currently have a Home Occupation Conditional Use Permit (HOCUP)? If yes, at what address and what is the HOCUP number? _____

2. Give a brief description of your business. Include the kinds of equipment used, what items are stored, vehicles used, travel needs, delivery needs, etc. related to the business. (Attach additional sheets if necessary.) _____

3. If you use any vehicles for the business, list the vehicle type and gross vehicle weight (GVW) for each. _____

4. Does the business sell products? If yes, describe what types of products are sold and how? _____

5. What is the size, in square feet, of your home and any accessory structures (such as a garage)? List structures separately. _____

What is the size, in square feet, of the area used for the business including office, work space and storage? Itemize. _____

6. Do you use any equipment that could interfere with radio or television receivers in the vicinity? List all types of equipment. Is there any equipment or business practice that needs more energy, water and/or sewer than a normal home would? _____

7. How many of the full time residents at this address will be employed in this business? _____

How many other persons are employed in this business? _____

Where do they work? (i.e. at the residence or another location) _____

8. How many parking spaces are available on the property? For a single family home, provide the dimensions of the driveway. _____

9. How many times will vehicles, related to the business, **come to** and **leave** the site on an average day? Include employees, delivery vehicles and clients. _____

10. Do you plan to advertize your business with a sign? If yes, describe. _____

Note that signs may be up to two square feet in size, non-illuminated, placed in a window.

11. Do you plan to make any changes to your residence for the business, such as a remodel or to store vehicles and/or materials on the property? Describe. _____

12. Please provide any additional information you think would be helpful in evaluating your application.

I certify to the best of my knowledge, the information provided on this application and exhibits (if any) are true and correct.

Sign **Owner / Agent** _____ **Date** _____

Print **Owner / Agent** _____ **Date** _____



OFFICE USE ONLY

Received By _____ Date _____

Fee \$ _____ Date _____ Receipt Number _____

HOME OCCUPATIONS REVIEW PROCESS

