



# HOME OCCUPATION PERMIT APPLICATION

CITY OF HIGH POINT  
 211 S. Hamilton St., High Point, NC 27260, Suite 316  
 Phone 336-883-3151

Please complete and submit the checklist, application, and all necessary supporting documentation to obtain a permit. Submitting complete and accurate information at the beginning will result in more efficient processing of your request.

## Submittal Requirements

Staff Use	√ or NA	All requests <u>shall</u> include:
		Enter √ or NA in column to the left    √=Provided    NA=Not Applicable
		<b>Floor Plan</b> of the dwelling with the area(s) to be used for home occupation marked
		<b>Application Fee</b> - \$25
		<b>This request <u>may</u> also require:</b>
		<b>Letter of Authorization</b> (if the dwelling is rented) from the landlord/management granting the tenant permission to conduct a home occupation in the specified dwelling
		<b>Health Department (applicable county) Approval:</b> Sites with well and/or septic, food handling, or a swimming pool require approval from the applicable county Health Department.
		<b>Completing Fields (General)</b>
		<p><b>Detailed Description:</b> Provide clear and accurate information for the entire scope of the proposed business activity. Your description should include details for the following (if applicable):</p> <ul style="list-style-type: none"> <li>• Goods that will be sold • Are they made at the residence? • Identify storage areas</li> <li>• Will products/equipment be stored in an accessory building? • Where will business activity be conducted? • Will maintenance or repairs of commercial equipment be associated with the business.</li> <li>• For daycares: Identify the number of children during various times of day and the hours of operation as well as drop-off/pick-up areas for children.</li> </ul>
		<p><b>Contact Information:</b> If you need assistance or have question regarding this application please contact us at:</p> <p><b>Planning and Development Department            Development Services Center</b>            211 S. Hamilton St., Suite 316, High Point, NC 27260            Phone: 336-883-3151 Fax: 336-883-8518            Email: <a href="mailto:permits@highpointnc.gov">permits@highpointnc.gov</a>            For more information on home occupation permits: <a href="http://www.buildhighpoint.com/198/Home-Occupation">http://www.buildhighpoint.com/198/Home-Occupation</a></p>

<b>GENERAL INFORMATION - PART 1</b>
<b>PROJECT INFORMATION (All fields in this section are required)</b>
Project Address: _____
Name of Business or Project Name: _____
Detailed Description (see completing fields section above): _____
_____
_____

<b>APPLICANT INFORMATION (All <i>applicable</i> fields in this section are required)</b>	
Applicant Name: _____	
Address: _____	
City/State/Zip: _____	
Phone: _____	Fax: _____
Email: _____	
Status of Applicant: <input type="checkbox"/> Property Owner; <input type="checkbox"/> Tenant; <input type="checkbox"/> Legal Representative; Other: _____	

<b>GENERAL INFORMATION – PART 2 (Please complete all applicable fields)</b>	
<b>APPLICATION SPECIFIC INFORMATION (Please complete all information)</b>	
<input type="checkbox"/> Existing Use(s) of the property: _____	<input type="checkbox"/> Total amount of floor area used for the home occupation: _____
<input type="checkbox"/> Total (habitable) floor area of the residence: _____	<input type="checkbox"/> Total number of employees, including the business owner: _____

<b>PARKING &amp; TRAFFIC (Please complete all applicable fields)</b>	
<input type="checkbox"/> Number of Existing Parking Spaces: _____	<input type="checkbox"/> How many attendees/customers will be on-site at any one time? _____
<input type="checkbox"/> Number of proposed spaces: _____	<input type="checkbox"/> Will a commercial vehicle(s) or trailer(s) be parked on the premises? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Total Number of Parking Spaces: _____	<input type="checkbox"/> If yes, how many vehicles? _____
<input type="checkbox"/> How many attendees/customers are expected to visit the business per day?: _____	<input type="checkbox"/> Length of each vehicle: _____

<b>AUTHORITY TO FILE APPLICATION</b>		
<b>**Required**</b>	I hereby agree to conform to all applicable laws and regulations of the City of High Point, applicable County and State of North Carolina (as may be applicable to my request), and certify that the above information and accompanying documents are complete, true and accurate to the best of my knowledge. In addition, I acknowledge that by filing this application, representatives from the City of High Point Planning and Development Department may enter the subject property for the purpose of investigation and analysis of this request. <b>Applications will not be accepted without signature(s).</b>	
	Print Applicant Name	Applicant Signature
		Date