

NEW HANOVER TOWNSHIP

Application for Home Occupation

Applicant(s)

Name _____

Address _____

Telephone _____

Property Location _____

Tax Parcel Identification Number _____

Approximate Parcel Size _____

Describe all activities involved in the proposed business: _____

List all materials proposed to be used in the home business: _____

List all machinery and equipment proposed to be used in the business: _____

Describe the existing buildings: _____

Size of the principle dwelling: _____ square feet (ground floor area only)

Portion of the residence to be used for business use: _____ square feet

Portion of accessory building to be used for business use: _____ square feet

How much additional vehicular traffic will be generated by the business: _____

Will the home occupation serve patrons or attract customers, clients, or students to the property?

yes no

How many off street parking spaces will be provided: _____

Will there be an outside advertising sign larger than 3 square feet?

yes no

Will the home occupation be conducted entirely within the principal residence?
yes no

Will the home occupation be conducted entirely within an accessory building?
yes no

Will the home occupation be secondary or incidental to the residential use of the property?
yes no

Will the owner / proprietor of the home occupation be a resident of the property?
yes no

Will there be more than one person, whether paid or unpaid, employed by the practitioner of the occupation to provide secretarial, clerical, or other similar assistance?
yes no

Will the home occupation display any products within view of adjoining properties or streets?
yes no

Will all of the goods available for retail sale, except those accessory to the home occupation, be produced upon the premises?
yes no

Will there be any storage of product, materials, or equipment related to the home occupation in any place except a fully enclosed building?
yes no

Will the home occupation generate or discharge to a sewer system any waste water or effluent?
yes no

Will the home occupation involve the use of explosive, flammable, caustic, hazardous or potentially dangerous materials?
yes no

Will the home occupation create any noise, odor, dust, vibration, electromagnetic interference, smoke, heat, or glare perceptible at or beyond the property boundaries
yes no

Type of Home Occupation (please check which best describes)

- Professional Office – Number of Employees _____
- Family Day Care – Number of Children _____
- Personal Service – Type _____, Employees _____
- Instructional Service _____
- Home Crafts – Number of Employees _____
- Trade Services – Type _____
- Repair Services _____
- Other, please describe _____

Is the business required to provide a restroom by local or state regulation? _____

A plot plan of the property showing the proposed off street parking area to accomodate the home occupation and a floor plan of the ground floor of the home and area to be used by the home occupation must be submitted with this application.

Date

Signature of Applicant