Pendleton County Joint Planning Commission Home Occupation Permit Application

Date:	
Applicant Name:	
Address:	_Phone:
Business Name:	-
Jurisdiction of Activity: ☐ Unincorporated Pendleton County ☐ City of	Falmouth
Present Zoning of Property:	
Please answer the following questions:	
1. What is the type of business requested?	
2. Number of Employees:	
3. Will anybody other than members of the family residing at the property occupation? ☐ Yes ☐ No If Yes, please explain:	• •
4. Will there be any external evidence that a home occupation is being con If Yes, please explain:	
5. Will the proposed home occupation use more than 25 percent of the gro dwelling unit? (Including the basement or cellar):	ss floor area of any one floor of the
6. Will the proposed home occupation be conducted in an accessory struct	ure? Yes No
7. Will the proposed home occupation involve any delivery vehicles or cre	ate other types of commercial
traffic? \Box Yes \Box No	
If Yes, please explain the type and frequency of deliveries or commercial	al traffic:
8. Will the proposed home occupation generate any motor vehicles or pede in a residential neighborhood? Yes No	estrian traffic greater than normal
If Yes, please explain the maximum number any one time and the total of	during one day:
Maximum number at one time: Total number during one day	
9. Will the proposed home occupation involve the use of any equipment or	
vibration, glare, fumes, odors, or electrical interference, detectable to the	
□ Yes □ No	
If Yes, please explain:	
10. What type of equipment will be used in the home occupation:	
11. Will the proposed home occupation involve the sale of commodities o	n the location? ☐ Yes ☐ No

12. Are any signs prop	osed? Yes No	
If Yes, please attack	ch sketch showing sign and location:	
connection with this appli attachments are correct an of the submitted informati	cation are based on the representations by d accurate. It is the applicant's responsib on and attachments. The applicant is response	the applicant that the submitted information and ility to provide proof of the accuracy and correctness consible for meeting all requirements of the National
Electric Code, Kentucky S	State Plumbing Code, and/or the Kentucky	Building Code, if applicable. The applicant is also
	any business/occupational licenses that are	Date
	Administrative Use Only-	
Approved	Approved with Conditions	_ Not Approved
Permit Fee	Date Fee Paid	
Zoning Permit Number	er	
Zoning Administrator	Signature	
Date	_	