

Permit Number: \_\_\_\_\_  
Township: \_\_\_\_\_

Map #: \_\_\_\_\_  
Parcel #: \_\_\_\_\_

## **APPLICATION FOR BUILDING TRADES HOME OCCUPATION**

\_\_\_\_\_ Building Trades Home Occupation Permit

\_\_\_\_\_ Building Trades Home Occupation  
Conditional Permit

### **Applicant**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_

### **Owner**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_

Address of Property \_\_\_\_\_

Zone District \_\_\_\_\_ 1/4 \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_

### **General Requirements**

1. No home occupation shall be permitted without the prior issuance of a Home Occupation Permit or Home Occupation Conditional Use permit.
2. The total number of home occupations conducted within a dwelling unit is not limited, except that the cumulative impact of all home occupations conducted within the dwelling unit or on the premises thereof shall not be greater than the impact allowed for one home occupation.
3. Conditional Use Permits granted by the Board of Zoning Appeals shall be temporary in nature, and shall be granted to a designated person who resides at a residential address. They are not transferable from person to person or from address to address.
4. Should a Home Occupation Permit holder or Conditional Use Permit holder die or move to a new location, the existing permit shall be automatically terminated. In the case of death, should a surviving spouse or child residing at the same address desire to continue the home occupation written notice to that effect shall be given to the Director of the Area Plan Commission who may authorize continuation of that permit without further hearing.
5. Permits and Conditional Use Permits, once granted, may be revoked by the Area Plan Office for cause after a hearing (for the revocation) by the Board of Zoning Appeals. Complaints seeking the revocation of such permit shall be filed with the Director of Area Plan may be initiated by the Area Plan Office or any two residents of the block (both sides of the street where the home occupation is being conducted).
6. The following uses by the nature of the investment or operation have a pronounced tendency once started to rapidly increase beyond the limits permitted for home occupations, thereby, impairing the use and value of a residentially zoned area for residential purposes and are more suited to commercial or industrial districts. Therefore, the uses specified below shall not be permitted, by any means or hearing, as home occupations.
  - a) Major auto repair
  - b) Painting vehicles, trailers, or boats
  - c) Funeral chapel or home
  - d) Gift Shops

- e) Medical or dental clinic
- f) Rental business including but not limited to video, home entertainment, equipment, tools, etc.
- g) Photo studios
- h) Welding or machine shops
- i) Warehousing and Distribution
- j) Car sales

## Building Trades Home Occupation Questions

<u>Yes</u>	<u>No</u>	
<input type="checkbox"/>	<input type="checkbox"/>	Obtain a Home Occupation Permit from the Area Plan Office.
<input type="checkbox"/>	<input type="checkbox"/>	Will CHO be operated entirely within the applicant's dwelling?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will the CHO operate entirely within an accessory structure?
<input type="checkbox"/>	<input type="checkbox"/>	Does the applicant reside at the dwelling unit for which the home occupation permit is being requested?
<input type="checkbox"/>	<input type="checkbox"/>	Will the CHO use more than twenty-five percent of the floor area of the dwelling unit used for human occupancy for the home occupation? (The floor area may include a finished basement, a finished attic, and an attached garage.)
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will the CHO use more than one thousand – five hundred (1,500) square feet of an accessory building or garage?
<input type="checkbox"/>	<input type="checkbox"/>	Will CHO involve the use or storage of tractor trailers, semi-trucks, or heavy equipment such as construction equipment used in a business?
<input type="checkbox"/>	<input type="checkbox"/>	Will CHO employ more than one person in addition to those who are permanent residents of the dwelling unit in which the home occupation is conducted?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will there be any employees employed on the premises?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will there be any employees come to the site at any time to receive instructions for the day, week, month, or year?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will any of the employees come to the site to do any administrative work for the business?
<input type="checkbox"/>	<input type="checkbox"/>	Is there any wholesale or retail business?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will it be conducted entirely by mail?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will it involve the sale of merchandise on the premises?
<input type="checkbox"/>	<input type="checkbox"/>	Will the CHO produce any noxious matter or perceptible noise?
<input type="checkbox"/>	<input type="checkbox"/>	Will there be toxic, explosive, flammable, combustible, corrosive, etiologic, radioactive, or other restricted materials used or stored on the site?
<input type="checkbox"/>	<input type="checkbox"/>	Will there be any alterations of the residential appearance, including creation of a separate entrance to the dwelling?
<input type="checkbox"/>	<input type="checkbox"/>	Has a recent addition been on the home for at least one year before home occupation is applied for?
<input type="checkbox"/>	<input type="checkbox"/>	Will there be a Commercial telephone directory listing, radio, or television service, used to advertise the <u>location</u> of a home occupation to the general public?
<input type="checkbox"/>	<input type="checkbox"/>	Will there be more than one vehicle utilized in the business?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will they be commercially licensed vehicles utilized in the business?
<input type="checkbox"/>	<input type="checkbox"/>	Will there be retail sales of products or goods produced or fabricated on the premises?
<input type="checkbox"/>	<input type="checkbox"/>	Will there be a freestanding sign larger than 3 square feet in area?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will the freestanding sign be larger than 6 square feet in area?
<input type="checkbox"/>	<input type="checkbox"/>	Will there be parties for the purpose of selling merchandise or taking orders?
<input type="checkbox"/>	<input type="checkbox"/>	Will one (1) additional off-street parking space be provided for the home occupation? (The required parking space may not be in the required front, side, or rear yard setbacks.)
<input type="checkbox"/>	<input type="checkbox"/>	Will the home occupation be carried wholly within the principal building?

- Yes    No      Will there be storage of goods, materials, or products connected with the home occupation?
- Yes    No      Will the storage be in an accessory building, garage (attached or detached), or outside?
- Are there materials, which decompose by detonation?
- Will there be additional points of access to any street, road, or highway?
- Will there be any on-site sales or training promotions?

### **Suspension or Revocation of Contractor Registration**

1. The Area Plan Board of Zoning Appeals will be appointed as a building commission and may suspend the “Contractor Registration”, issued under this section, to any person, partnership, or corporation if one of the following is shown:
  - a) The “Contractor” made any materially false statement of fact on his application or “Registration”;
  - b) The “Contractor acted fraudulently or with deceit in his relationship with other person, partnerships, or corporations with regard to construction activities engaged in by such contractor;
  - c) Construction activity was performed either incompetently or in such manner that it does not comply with the Building Codes and procedure or any provisions of State or Local law;
  - d) The “Contractor” failed to correct a violation of the Building Code, provisions of State or Local law relative to the construction activity for which the “Contractor” was responsible, after any authorized official or employee of the Area Plan Commission issued is a notice of such violation, revoked a permit or issued a stop work order;
  - e) The “Contractor” has consistently failed to apply for or obtain required permits for construction activity accomplished by such contractor;
  - f) The “Contractor” has consistently failed to timely file certificates of completion and compliance as required for construction activity accomplished pursuant to his “Registration”;
  - g) The “Contractor” has consistently failed to obtain inspections at designated stages of construction activity;
  - h) The “Contractor” has attempted to conceal violations of the Building Codes, provisions of State or Local law relative to construction activity;
  - i) Knowingly violates a posted stop work order.

### **This application must be accompanied by the following:**

- ***Legal description***
- ***Detailed site plan drawing with:***
  - ***All building dimensions (any additions, if applicable)***
  - ***Lot size***
  - ***Parking areas with size, spaces, flow pattern, and drive aisles***
  - ***Location of proposed CHO and size of area used for***
- ***Typed description of type of business, proposed hours, estimated number of clientele, and any other significant or requested information.***

I have read this application in its entirety and have determined that I would fall under the guidelines of a Building Trade Home Occupation (**Permit / Conditional Permit**) I do hereby verify by signing this application that I meet the guidelines of a Building Trade Home Occupation (**Permits / Conditional Permits**).

I am aware that if any of these restrictions are violated, it will result in a revoking of this permit and/or possible fines. Being in compliance with all laws and specifically [AWZO 18.7] at grantcounty.net and [IC32-27] at accessIndiana.gov.

Title Holder Signature \_\_\_\_\_ Date \_\_\_\_\_  
Print

Occupant/Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_  
Print

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(For Office Use Only)

Reviewed and Approved by \_\_\_\_\_ Date \_\_\_\_\_

Fee \_\_\_\_\_ Receipt Number \_\_\_\_\_

Contractor Registration Number \_\_\_\_\_