City of North Branch Home Occupation Permit



PROPERTY OWNER(S) NAME(S) (SIGNATURE REQUIRED)		BUSINESS PHONE () -		HOME PHONE () -
PROPERTY OWNER ADDRESS		CITY		STATE ZIP
LEGAL DESCRIPTION (Lot/Block/Plat or Section Number)		ASSESSOR PARCEL NO		ZONING
Lot: Block: Section:				
If metes & bounds, attach a copy of exact legal desc.				
DESCRIPTION OF AND/OR REASON FOR REC	QUEST AND INTE	NDED START DATE	∃:	
Please answer the following questions and explain	vour aneware.			
Where will the business be operated from?	Will the business use be secondary to the use as a home? (Will the home still be the primary use of the property?)		Will the outside appearance of the property/house change?	
Will any goods/materials be sold on the parcel?	Will there be any outdoor storage?		Will there be additional traffic to the area?	
PROPERTY OWNER/APPLICANT CONSENT I declare under penalty of perjury that I am the owner of said property or have written authority from property owner to file this application. I certify that all of the submitted information is true and correct to the best of my knowledge and belief. I understand that any misrepresentation of submitted data may invalidate any approval of this application.				
		Do	ota of Hanring	if needed
Public Hearing needed? Yes / No Fee: \$100 - Admin Review Only		Date of Hearing if needed Date		
\$300 – Public Hearing Reciept # Approved: Yes / No Approval Signature				
Approved. Tes/100 Approvar signature	Date			