

City of Napavine

P. O. Box 810
Napavine, WA 98565
(360) 262-9344 FAX (360) 262-9199

**CONDITIONAL USE – HOME OCCUPATION
PERMIT APPLICATION**

City Use Only:

Date Received _____

Reviewed By _____

Permit Approved

Permit Denied

Comments _____

Fee: \$

Date Paid: _____

Receipt Number: _____

Name of Applicant

Mailing Address

Phone

Owner Name / Mailing Address

Location of Worksite

Legal Description (May be attached)

Parcel No.

PROPERTY ZONING:

1. Please state the home occupation in which you propose to engage. Yes No

2. Will the home occupation utilize more than twenty five percent (25%) of the actual total floor area on one floor

- | | | |
|---|--------------------------|--------------------------|
| within the dwelling? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Will the home occupation be a secondary use of the home? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Will structural alterations of the dwelling be required to accommodate the home occupation? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Do you propose to construct a separate exterior entrance to the space devoted to the home occupation? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Will others not in the immediate family be engaged in the home occupation? | <input type="checkbox"/> | <input type="checkbox"/> |
| | <u>YES</u> | <u>NO</u> |
| 7. Will more than two (2) family members be engaged in the home occupation? | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Do you intend to use commercial advertising for your home occupation? | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. If your answer to question # 8 was yes, please state type of advertising. _____ | | |
| 10. Do you propose to use window displays or display sample commodities outside of the dwelling? | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Do you propose to store stock in trade or commodities for sale that are not produced on the premises? | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Would materials or equipment used in the home occupation create loud noises, dust, smoke, odors, radio and television interference, or other detriments to the residential setting? | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Please describe how materials or commodities will be delivered to and from your home. _____

_____ | | |
| 14. Would the home occupation generate more traffic on streets adjacent to your home? | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. If the answer to question 14 is yes, state how many more and where they will be parked. _____

_____ | | |
| 16. Would your home occupation require a significant increase in electrical power, water and sewer use? | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Would your home occupation increase the danger of fire in your neighborhood? | <input type="checkbox"/> | <input type="checkbox"/> |

CONDITIONAL USE – HOME OCCUPATION PERMIT

I have answered all questions to the best of my knowledge and understand that if not answered truthfully, my permit, if granted, may be revoked. I understand that the conditional use filing fee is non-refundable.

Applicant Signature

Title

Date