

Toquerville City
HOME OCCUPATION APPLICATION
\$35.00 fee



CONDITIONS FOR APPROVAL OF HOME OCCUPATION

1. Does the proposed business alter the character of the neighborhood? (activity, color, design, storage, lighting, sound, odors, emissions etc.) YES/NO
2. Will employees not living at the premises be employed? YES/NO
3. Will the business need outside storage? YES/NO
4. Will the business require more than 2 vehicles? YES/NO
5. Will the business require more than 500 sq. ft. of space? YES/NO
6. Is the home business to be conducted in a garage? YES/NO
7. Will you install signs on the premises for the business? YES/NO
8. Will the business create noise, vehicular, or pedestrian traffic in excess of normal? YES/NO
9. Will the business create non-conformance to fire, building, plumbing, or electrical codes? YES/NO
10. Will the business create an excess demand on public utilities? YES/NO
11. Will the business require deliveries by semi-tractor/ trailers? YES/NO
12. Will the business be in operation between the hours of 10pm and 6am? YES/NO
13. Will the business require the use of hazardous or flammable materials? YES/NO
14. Will the business create garbage or refuse in excess of normal? YES/NO

*IF YOU ANSWERED YES TO ANY OF THE ABOVE QUESTIONS – STOP HERE. THIS BUSINESS DOES NOT QUALIFY FOR A HOME OCCUPATION PERMIT. PLEASE FILL OUT A CONDITIONAL USE PERMIT APPLICATION.

This application shall be accompanied by the following:

- ____1) Copy of state license(s) and tax number(s) required for the business.
- ____2) A vicinity map showing the general location of the application.
- ____3) A copy of a plot plan showing the following:
 - ____Property boundaries, dimensions and existing streets.
 - ____Location of existing and proposed buildings, parking, landscaping and utilities.
 - ____Adjoining property lines and uses within one hundred (100) feet of subject property.
- ____4) Building elevations for **new** construction, noting proposed materials and colors.
- ____5) Traffic impact analysis, if required by the City Engineer.
- ____6) A statement indicating whether the applicant will require a variance.
- ____7) Warranty deed, preliminary title report, or other document (see Affidavit of Property owner attached) showing evidence that the applicant has control of the property.

By submitting a signed application, I certify that the business does not and will not employ, or subcontract with any entity which employs workers in violation of 8 U.S.C. §1324a during the licensing period. By signing, I acknowledge that I have read, understand and agree to comply with the requirements of federal and state law regarding eligibility of workers and that I have read and agree to comply with Chapter 23 Home Occupations of the Toquerville City Code.

Applicant Signature: _____ **Date:** _____

(Office Use Only)

Received by	Date
Building Inspector	Date
Ash Creek Special Service District	Date
Hurricane Valley Fire District	Date
Zoning Official	Date

Payment Date: _____ Payment Method: _____ Approval Date: _____

AFFIDAVIT
PROPERTY OWNER

STATE OF UTAH)
 :SS
COUNTY OF)

I (we), _____, being duly sworn, depose and say that I (we) am (are) the owner(s) of the property identified in the attached application and that the statements herein contained and the information provided identified in the attached plans and other exhibits are in all respects true and correct to the best of my (our) knowledge. I (we) also acknowledge that I have received written instructions regarding the process for which I am applying and the Toquerville City Planning staff have indicated they are available to assist me in making this application.

(Property Owner)

(Property Owner)

Subscribed and sworn to me this _____ day of _____ 20__.

(Notary Public)

Residing in: _____

My Commission Expires: _____

Agent Authorization

I (we), _____, the owner(s) of the real property described in the attached application, do authorize as my (our) agent(s) _____ to represent me (us) regarding the attached application and to appear on my (our) behalf before any administrative or legislative body in the City considering this application and to act in all respects as our agent in matters pertaining to the attached application.

(Property Owner)

(Property Owner)

Subscribed and sworn to me this _____ day of _____ 20__.

(Notary Public)

Residing in: _____

My Commission Expires: _____

Toquerville City BUSINESS LICENSE APPLICATION



Name: _____ **Telephone:** _____

Business Name: _____

Type of Business: _____

Organization Type: Individual _____ Partnership _____ Corporation _____ LLC _____ Other _____

Name and address of owners, partners, or corporate officers:

<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Title/Position</u>
_____	_____	_____	_____
_____	_____	_____	_____

Physical Address: _____

Mailing Address: _____

Website: _____

Email: _____

Tax ID of Subject Property: _____ **Zone District:** _____

Average number of Employees: _____ **Days and Hours of Operation:** _____

Is this a sexually oriented business? Yes / No

Contractor License # _____ **Federal Tax ID #** _____

Sales Tax # _____ **Transient Room Tax #** _____

*Please attach copies of State license(s) and proof of tax number(s).

Would you like your business info listed on the City's website? Email: Yes / No Website: Yes / No

By submitting a signed application, I certify that the business does not and will not employ, or subcontract with any entity which employs workers in violation of 8 U.S.C. §1324a during the licensing period. By signing, I acknowledge that I have read, understand and agree to comply with the requirements of federal and state law regarding eligibility of workers.

I hereby certify that the statements contained herein are true and correct to the best of my knowledge and that the falsification of any information contained herein constitutes sufficient cause for rejection of this application or revocation of any license previously granted by Toquerville City. I understand that additional information may be required and I agree to supply such information as requested. I further understand that this license will expire on December 31st and it is my responsibility to renew this license without further notification from Toquerville City.

Applicant Signature: _____ **Date:** _____

(Office Use Only)

City License Officer	Date
Building Inspector	Date
Ash Creek Special Service District	Date
Hurricane Valley Fire District	Date
Zoning Official	Date

Approval Date: _____ Business License #: _____