

ZONING COMPLIANCE APPLICATION Home Occupation

Planning and Economic Development Division 101 E. Orange St., PO Box 429, Hillsborough, NC 27278 Office: 919-296-9470 | Fax: 919-644-2390 planning@hillsboroughnc.gov www.hillsboroughnc.gov

A zoning compliance permit is required for site or use changes regulated under the Unified Development Ordinance on property in the town limits and in the extraterritorial jurisdiction.

A home occupation is the base of operations for the business, and the primary function of the business takes place on the residential property for which the permit is issued. For example: A person who telecommutes to a place of business in Research Triangle Park is not engaged in a home occupation and does not require a home occupation permit, but a person who owns a computer consulting business and conducts business from home does. A self-employed business owner who keeps business records at home, is contacted at home to arrange work but does not do any of the job function at home does not need a home occupation permit.

For the application to be considered complete, all sections must be completed. The property owner must sign the Authority to File Application section on the last page (applicant and property owner signatures are required).

GENERAL INFORMATION							
Project Address:							
Parcel ID #:		Zoning Classification:			□ Historic District Overlay		
Applicant Name:							
Mailing Address:							
Phone 1: Phon		Phone 2:	ione 2:		Email:		
Status of Applicant:	Proper	ty Owner	Contractor		Legal Representative	□ Other	
Property Owner(s) Name:							
Mailing Address:							
Phone 1: Phone 2		Phone 2:	e 2:		Email:		

HOME OCCUPATION INFORMATION					
Name of Business:	Business Type (Use):				
Please explain your proposed business in detail (2 to 3 sentences):					

SITE USAGE						
Will the home occupation be conducted entirely within the residence? \Box Yes \Box No						
Total (hea	Total (heated/habitable) floor area of the residence: square feet					
Total amo	ount of (heated/habitable) floor	r area used for the home occupat	tion:	square feet		
Will a det	ached accessory structure or ex	xterior changes be required with	the home	occupation? Yes No		
IF YES	YES Total square footage of detached accessory structure: square feet					
	Total amount of primary residence floor area used for the home occupation: square feet					
	Total amount of addition to main residence: square feet					
Will any h	azardous materials be stored o	on site? 🗆 Yes 🗆 No (If yes, provi	de a separa	ate list.)		
Will there be any outside storage or display of goods or materials? Ves No						
If yes, what type of goods or materials?						
PARKING	AND TRAFFIC					
Existing Parking Spaces:		Proposed Parking Spaces: T		Total Parking Spaces:		
Types of Vehicles Expected:						
Total Number of Employees (including the business owner):						
How many clients are expected to visit the business per day: At any one time?						
Will you be making deliveries as part of your business? Yes: per day No						
Will you be receiving deliveries as part of your business? Yes: per day No						

REQUIRED DOCUMENTATION

Please see the <u>Home Occupation Checklist</u> on the town website to ensure all requirements are met.

With this application, provide a plan drawn to scale that shows all existing structures and any proposed changes. Include a floor plan. View the <u>sample plot plan</u> on the town website.

AUTHORITY TO FILE APPLICATION

I hereby agree to conform to all applicable laws and regulations of the Town of Hillsborough, County of Orange, and State of North Carolina (as may be applicable to my request) and certify that the above information and accompanying documents are complete, true, and accurate to the best of my knowledge. In addition, I acknowledge that by filing this application, representatives from the Hillsborough Planning and Economic Development Division may enter the subject property for the purpose of investigation and analysis of this request.

APPLICATIONS WILL NOT BE ACCEPTED WITHOUT THE PROPERTY OWNER'S SIGNATURE.

Applicant Signature:	 Date:
Property Owner Signature:	 Date:

DEPARTMENT USE ONLY					
Date Received:					
Staff:					
ETJ: 🗆 Yes, 🗆 No					
Legal Nonconforming Lot: Yes, No					
Floodplain on Site: 🗆 Yes, 🗆 No					
Flood Zone:					
Flood Map #:					
Plus (+) Overlay District \Box Yes, \Box No	Plus (+) Overlay District 🗆 Yes, 🗆 No				
Historic District Overlay 🗆 Yes, 🗆 No					
Section 4B Only: Is the event in the juris	diction	of the town	? □ Yes, □ No		
Zoning Officer's Decision 🗆 Approved, 🗆 Approved with Conditions, 🗆 Denied					
Approved Conditions:					
Comments or Reason for Denial:					
Permit:					
Zoning Office Signature:		Date:			
Date Permit Picked Up: Fee: \$			Receipt #:		