TOWN OF HERMON APPLICATION FOR HOME OCCUPATION

Please Print or type your application. Attach a Site Plan and/or floor plan, as appropriate. Please fill in all applicable areas, as incomplete applications will be returned for missing information. Please submit completed application to the Code Enforcement Officer for processing.

Proposed Business Name	
Name of Applicant:	
Mailing Address:	
Telephone:	
Property Owners Name:	
Property Location (street or ro	ad):
Tax Map Lot	Deed Book & Page Number:
Zoning District:	Lot Size: Frontage:
Type of Business Activity:	
Proposed Hours of Operation:	
Days of Operation:	
The proposed use will be carrie	ed on entirely within (check off one)
Principal Structure	☐ Accessory Structure
Actual area in square feet of sp	pace to be utilized for the proposed use:
	(Y/N) If yes, the sign for a Home Occupation in not exceed 4 sq. ft. in area and must be located at a traveled way.
Number of parking spaces ded	icated to the Home Occupation:

Will the proposed use generate any of the following (Answer each one YES or NO) Noise Dust Heat Glare Smoke Vibration Odors Traffic Electrical Disturbance (Explain any yes answers)		
Other comments or inform Enforcement Officer.	ation you wish to bring to the attention of the Code	
thereto is true and correct. application does not mean	on contained in this application and the attachments I (we) also understand that the submission of this the activity being applied for is approved. Approval will opriate review of the Hermon Land Use Ordinance.	
Date	Applicant(s) Signature	