

TOWN OF WARWICK
CLASS 1 HOME OCCUPATION PERMIT APPLICATION
\$100 FEE

Date _____

Application is hereby made to the Building Department for the issuance of a Home Occupation Permit (Class 1) pursuant to the Code of the Town of Warwick Section 164-43.5. The applicant agrees to comply with all applicable laws, ordinances and regulations.

SITE DATA:

Street Location: _____

Section – Block – Lot: _____ – _____ – _____ Zone: _____

OWNER:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Mobile: _____

DESCRIPTION: (Fill in ALL blanks!)

Type of occupation: _____

Name of Business: _____

Number of customers anticipated _____ (per day)

Average number of deliveries _____ (per day)

Number of parking spaces provided _____ (max 3)

Number of home occupational uses within the residence: _____

Total floor area of the residence (habitable): _____ (SF)

Total area where home occupation will occupy: _____ (SF)

Number of persons employed outside the members of the household occupying the dwelling: _____

Hours of operation: _____

CLASS 1 HOME OCCUPATION SKETCH PLAN SUBMISSION CHECK LIST:

- _____ 1. Detail location as to where the business will take place in dwelling. Provide floor plan.
- _____ 2. Survey showing parking areas.
- _____ 3. Copies of required licenses (if any).

AUTHORIZATION:

State of New York, County of _____, _____, being duly sworn deposes and says he/she is the owner and is duly authorized to perform or have performed said work and to make and file this application; that all statements are true and to the best of his/her knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith.

Sworn to before me

this _____ day of _____, 20 _____

Owner Signature: _____

Notary Public: _____

Print Name: _____

Stamp:

FOR TOWN USE ONLY

Fee: _____ Check #: _____

Cash

Comments: _____ Application #: _____