



Chandler · Arizona
Where Values Make The Difference

Home Based Business/Occupation Zoning Clearance Application

Date		Business Name		Permit No.
Applicant Name				
Home Address		City, State, Zip Code		
Home Phone	Daytime Phone	E-mail address		
Application Received Date Stamp & Initial				

Describe in some detail the nature of the business & proposed use of your home (what will occur there?)

For a Home Based Business/Occupation, you must agree to comply with the following items. Please read and initial each item, and sign your name below.

- _____ 1. **Only one (1) commercial vehicle may be kept at the home related to the home business.**
- _____ 2. **Any Home Business/Occupation must be:**
 - a. Conducted entirely within the dwelling (cannot occur within a garage/carport or accessory building).
 - b. Carried on by a member of the family currently living there.
 - c. Clearly incidental and subordinate to the use of the home for dwelling purposes.
- _____ 3. **Any Home Business/Occupation must not:**
 - a. Change the residential character of the neighborhood.
 - b. Have any employees, students, customers, etc. coming to the home other than immediate family living in the home. Only limited parcel and package deliveries are allowed.
 - c. Display any signs.
 - d. Have any outside storage, commercial equipment, displays, or any other outside activity at the home. (Equipment and materials must be stored off-site).
 - e. Require the use of mechanical equipment not normally used for hobby or household purposes.
 - f. Sell any commodity on the premises (that is, no retail/wholesale sales in the home).
 - g. Keep inventory of saleable commodities on the premises beyond the size of a small storage closet area.

I have read and understood the above listed items for a Home Based Business/Occupation. I certify that the Home Based Business/Occupation I propose will not violate any of the items listed above. I agree to conduct my Home Based Business/Occupation in accordance with the above listed items, and I understand that City Staff may perform periodic inspections to determine compliance. Upon approval of this zoning clearance form, the City's Site Development staff will notify the City's Tax & License Division of your business, as you will be required to apply for and be issued a City business license prior to operating your business.

Applicant Signature: _____ **Date:** _____

<i>For City Use Only</i>		
Zoning Checked By	Date	Approved: Yes No
Reason for denial and/or remarks		