



- HOME OCCUPATION - SUPPLEMENTAL APPLICATION FORM

12835 Newcastle Way, Suite 200
Newcastle, WA 98056
Phone 425.649.4143 Fax 425.649.4363
www.newcastlewa.gov

OFFICE USE ONLY

Application No: LUP _____ Is a Master Land Use Application form attached? Yes No

If no, do not accept this form.

Name of Home Occupation/Business: _____

Definition:

A home occupation is defined as “an economic enterprise operated within a dwelling unit, incidental and secondary to the residential use of the dwelling unit, including the use of the dwelling unit as a business address in a directory or as a business mailing address.” (NMC 18.06.315)

Home Occupation Type:

Does the requested home occupation:

- | | |
|---|--|
| a. Engage outside volunteers or employees (non-residents of the dwelling)? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b. Rely upon exterior signage to identify the property as a business location? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| c. Anticipate more than five clients or customers to visit the premise for any reason per week? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| d. Anticipate exterior storage of materials, goods or equipment? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

If you answered no to all of the above, check the Type I Home Occupation box and see note below. If you checked yes to any of the above, check the Type II Home Occupation box and complete this form:

- Type I Home Occupation
 Type II Home Occupation

Note: If the proposed home occupation is a Type I Home Occupation, you do not need to complete or submit this application; no further review is necessary. A Type I Home Occupation is outright permitted subject to the criteria in NMC 18.30.040, which defines the amount of the dwelling that can be used for home occupations, the types of uses specifically prohibited as home occupations, and general operational requirements. For Type II Home Occupations, please complete and submit this application to the City.

Description of Business. Please describe the proposed home occupation, as follows:

1. Type of business (e.g., bookkeeping, sales, mail order, personal services, counseling, etc.)
2. Products sold or services provided:
3. Total number of employees:

Employee Name(s) and Residency. Please provide the name and residential address of each employee of the business:

Clientele:

Number of customers or clients visiting the site at any one time: _____

Number of customer or clients expected per week: _____

Dwelling Type: Single Family Condominium Apartment Other (describe) _____

Dwelling Size: _____ square feet total (excluding attached garages and storage buildings)

Lot Size: _____ square feet

Business Location in Dwelling or On Site. Please describe where the home occupation will occur within the home or on the site, and the square-footage of the area devoted to the home occupation:

Location (check all that apply):

Within the dwelling or house, confined to _____
(Specify which room(s))

Total square footage of room(s) devoted to home occupation: _____ square feet.

Within a detached structure on the site.

Total Square footage of detached structure: _____ square feet.

Vehicle Count. Please describe the number of vehicles (including automobiles, recreation vehicles and trailers) owned or under control of the resident(s) of the site and that have occasion to park on the site or abutting street, as follows:

Total number of household vehicles. _____.

Total number of both household vehicles and vehicles used for proposed business. _____

If yes, describe how many vehicles will require street parking and where street parking is available proximate to the site:

Vehicles Associated with Business. Please describe in the following table all vehicles (including towed trailers and equipment) associated with the business and where said vehicles will be parked while at the home and while not in use.

Vehicle Information			
	Vehicle 1	Vehicle 2	Vehicle 3
Type			
Make			
Model			
Gross Vehicle Weight			
Parking location (e.g., driveway, street, remote (describe))			

Vehicles Associated with Clientele.

Where will clients or customers park while visiting the site?

On-site Parking. Please describe all on-site parking spaces, as follows:

1. Total number of on-site parking spaces:
2. Number of parking spaces that are:
 - a. Exterior spaces
 - b. Garage spaces
3. Are exterior parking spaces paved? Yes No
4. How close are parking spaces to side property lines? _____ feet.

Street Parking. Will street parking be needed to accommodate both household vehicles and vehicles of the business and its clients? Yes No

Will client parking displace needed parking spaces for household or business vehicles? Yes No

Equipment Associated with Business. Please describe all electrical or mechanical equipment used for the business (e.g., typewriters, grinders, kilns, tools, electronics, etc.):

Outdoor Storage: Will the business entail the outdoor storage of materials, goods, equipment, supplies, or products?

Yes No If yes, complete the following:

Items to be stored:

Location of stored items:

Square footage of storage area:

Proposed Methods to fully screen storage from off-premise viewing:

Expected Noise or Vibration. Will there be any equipment or activities associated with the business that will produce noise or vibrations (e.g., hammering, grinding, clanging, dropping, mechanical or electronic humming, beeping, revving, etc.)?

Yes No If yes, describe:

Expected Odors, Fumes, Dust or Smoke. Will there be any operations or materials that will produce or emit odors, fumes, dust or smoke?

Yes No If yes, describe the emission and proposed means to keep emissions non-detectable beyond the premises :

Applicant's Statement: I _____(name) hereby affirm, under penalty of perjury, that I am the applicant of this proposal and that the property(ies) affected by this application, including any easements, is(are) under my exclusive ownership, or that this application has been submitted with the consent of all owners of the affected property(ies), including any easements. I further hereby affirm that the foregoing statements and answers are in all respects true and correct as to my understanding and belief as to those matters.

Signature: _____ Date: _____

Note: All fields must be completed, including blank lines and check boxes.