

CLUR: _____
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AFFIDAVIT OF OPERATIONAL CONDITIONS FOR THE HOME OCCUPATION

This application is reviewed pursuant to Section 158.199 (Standards for Home Occupation) and Section 158.201 (Enforcement) of the Hopkinsville Zoning Ordinance.

Name: _____ Phone No.: _____

Address: _____

AUTHORIZATION

Names and signatures of all persons having an interest in the property whose consent is required (by virtue of such interest) to authorize filing of application.

Name (Please Print) _____ _____	<u>Capacity</u>	
	Owner	Lessee
	_____	_____

Address _____ _____	_____
	Signature

Name (Please Print) _____ _____	<u>Capacity</u>	
	Owner	Lessee
	_____	_____

Address _____ _____	_____
	Signature

Name (Please Print) _____ _____	<u>Capacity</u>	
	Owner	Lessee
	_____	_____

Address _____ _____	_____
	Signature

(All signatures represent that they have full legal capacity to, and hereby do, authorize the filing of this application.)

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I understand and agree that the terms contained herein are binding. I also understand and agree that if any deviation, modification or change in any of the previously stated conditions occurs, it shall void said permit and a hearing before the Board of Zoning Adjustment will be held.

I furthermore understand that any change of ownership of the property as referenced herein shall void said permit.

The foregoing Affidavit of Operational Conditions for the Home Occupation is true and accurate to the best of my knowledge and belief.

Applicant/Authorized Agent

The foregoing Affidavit of Operational Conditions for the Home Occupation was acknowledged and sworn before me by _____ this _____ day of _____, 20____.

Notary Public, Kentucky State-at-Large

Commission expires:_____

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AFFIDAVIT IN COMPLIANCE WITH SECTION 158.199
STANDARDS FOR HOME OCCUPATION

Under the provisions of Section 158.199, I, the undersigned applicant, do swear and/or affirm that the foregoing constitutes all related business activities at the residence stated below and all activities that will occur off-site as a result of the proposed home occupation. I also affirm that any deviation or modification in the home occupation shall constitute a violation of Chapter 158 of the City of Hopkinsville, Kentucky Code of Ordinances.

Please describe below all related business activities at the residence and all activities that will occur off-site as a result of the proposed home occupation.

Applicant

Pursuant to Section 158.199

1. I affirm that there will be no on-site customers or customers coming to the Home Occupation.
2. I affirm no outside alterations, modifications or change to the existing structure will be undertaken.
3. I affirm no employee(s) other than the resident(s) of the home will be employed.
4. I affirm no manufacturing, construction or finishing work will take place on-site.
5. I affirm no outdoor signs will be on-site.
6. I affirm that there will be no additional vehicular traffic as a result of the Home Occupation.
7. I affirm that there will be no on-site storage of merchandise, inventory, goods or services will be conducted.

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Hopkinsville-Christian County Planning Commission Application Form
(Home Occupation Only)

Please describe your proposed home occupation. Include a brief description of all business related activities that will occur at the residence and all activities that will occur off site as a result of your home occupation.

Do you currently live at the residence designated for the home occupation? _____ yes _____ no

Other than immediate family members and yourself, how many employees will be engaged in this home occupation?

What are the hours of operation for the home operation? _____

During what days of the week will the home occupation occur? _____

Will potential customers be serviced on or off site? _____ on site _____ off site

If customers are serviced on-site (at your residence), will this be done on an appointment or drop in basis? _____ appointment only _____ drop in _____ both

How many rooms of your residence will be used for the home occupation? _____

Estimate the total amount of floor space to be used for the home occupation. _____ sq. ft.

Does the home occupation require the use of a sign or other advertising device? _____ Yes _____ No

If Yes please describe _____

Will alterations to the interior or exterior of your residence be required as a result of the proposed home occupation?

_____ Yes _____ No

If Yes please explain

Please list any and all business related equipment that will be used at your residence (examples include telephone, computer, video, drafting equipment, etc.)
