

HOME OCCUPATION LICENSE/PERMIT

NEW _____ RENEWAL _____

Business Name:				
Street Address:	City:	State:	Zip Code:	
Home Phone:	Fax:	E-Mail	:	
Type and Description of I	Home Occupation:			
Do you plan any remodel	ing or alterations for th	e Home Occupa	tion?	
()Yes()No (If yes, discu	uss the plans with the Mo	ontgomery Buildin	g Department)	
Hours of operation	C	Days of week		
	any changes in the day	to day activities fo	or this Home Occupation	
Renewals Only: Are there				
Renewals Only: Are there from last year?				
•	se describe:			
from last year?	se describe:			
from last year?	se describe:			

Home Business

Chapter 11, Section 1107, Subd. 11.

Standards. All home occupations shall conform to the following standards:

- A. The use shall be limited to one room in the dwelling unit and shall not exceed 50% of the structure's total floor area.
 - 1. Day-Care businesses may occupy more than one room in the dwelling but shall not exceed 50% of the structure's total floor area.
- B. No more than one person, other than the members of the family occupying the dwelling shall be employed in conjunction with the home occupation.
- C. No noise, vibration, glare, fumes, odors, or electrical interference detectable off premises.
- D. No special or hazardous wastes, or noxious matter may be generated.
- E. No mobile home, travel trailer, motor home, camper or similar vehicle may be used for office, business, industrial manufacturing, testing or storage of items used with or in a business, commercial or industrial enterprise.
- F. No interior or exterior business sign shall be permitted unless authorized by the sign regulations for residential districts.
- G. There shall be no exterior storage of business equipment, materials, merchandise, inventory, or heavy equipment.
- H. Vehicular traffic flow and parking within the driveway shall not increase by more than four additional vehicles at a time.
- I. All parking related to the home occupation shall be off street and within the driveway.
- J. Shall not constitute a fire hazard to neighboring residences, will not adversely affect neighboring property values, or constitute a nuisance or otherwise be detrimental to the neighborhood because of excessive traffic, excessive noise, odors, or other circumstances.
- K. No home occupation shall operate between the hours of 10:00 p.m. and 6:00 a.m. unless such activity is entirely maintained within the principal building and will not require any on-street parking.
- L. The City reserves the right upon issuing any home occupation license to inspect the premises in which the occupation is being conducted to ensure compliance with the provisions of this Section, the Minnesota State Building Code, the Montgomery Residential Rental Code, or any other conditions additionally imposed.

Inspection

The City hereby reserves the right upon issuing any Home Occupation license to inspect during reasonable hours, without notice, the premises in which the occupation is being conducted to insure compliance with the provisions of this Section and any conditions additionally imposed.

Revocations

- 1. Permitted Home Occupation license approvals shall remain in effect until:
 - a. Such time as the business is not in compliance with any portion of this Ordinance, or any applicable State or Federal regulation.
 - b. Such time that there is a violation of the terms and conditions of license or permit approval.

c. Such time as there is a change in the conditions of operation of the business as it was originally approved; including any changes in the nature of the business, any substantial change in the extent of business, any expansion of business facilities, or any other circumstances related to the business which have the potential to significantly affect surrounding properties, or which may pose a threat to the health, welfare or safety of the general public.

I HEREBY AFFIRM THE ABOVE STATEMENTS ARE TRUE AND CORRECT. I HAVE READ MONTGOMERY'S HOME OCCUPATION REGULATIONS AND AGREE TO ABIDE BY THEM AND ANY STIPULATIONS ADDED BELOW. I HEREBY CERTIFY THAT THE LOCATION (ADDRESS) OF THE PROPOSED HOME BUSINESS (AS NOTED ABOVE) IS USED AS MY PERMANENT AND PRIMARY RESIDENCE. I UNDERSTAND THAT FALSE INFORMATION OR VIOLATION OF ANY STIPULATION COULD RESULT IN REVOCATION OF THIS PERMIT.

Applicant Signature:	Date:	

(Please print name)

CITY USE ONLY – Approvals: Admin. Dept		
CONDITIONS OF ISSUANCE:		
APPROVED: () Yes () No [If no-reasons for denial]:		
Signature:	Date:	