

Home Occupation Permit Application (BLR) (Required only if customers visit home)

415 W 6th ST ~ Vancouver, WA 98660, P.O. Box 1995 ~ Vancouver, WA 98668, Phone (360) 487-7803

Email completed application to cddplanning@cityofvancouver.us

TYPE OF HOME OCCUPATION BUSINESS						
Contractor [Retail	Service		☐ Wholesale	9	Other
PLEASE BE ADVISED						
<u>Include a Floor Plan</u> with your application. Click <u>here</u> for an example of how to create a floor plan.						
BUSINESS SITE LOCATION AND INFORMATION						
Site address:			Parcel #:			
Business Name:			DBA:			
UBI# (9-digit number):						
First date of conduction business:			Is this: A new business An existing business			
DESCRIPTION OF BUSINESS						
APPLICANT						
Name:		Phone:		Email:		
ZONING INFORMATION						
Zoning District: How many employees, in addition to the owner, will be employed at the address?						
PLEASE NOTE: This application is only for a home occupation permit. You must also be registered with Washington State and either hold a valid City of Vancouver business license or, if qualified, claim a City license exemption. Please visit the Washington Department of Revenue: Department of Revenue						
HOME OCCUPATION STANDARDS You may operate a business in your home only when the following development standards are met, as allowed under						
or disruptive 2. A current and license exemy for more information. 3. Not more the may be used occupation. 4. Two nonresides business must business must be sales at a sales	pation must be clearly in terms of appearant valid City of Vancountion claim (Determinantion. In 25% of the combination for business activities dent employees are post reside within the durare prohibited exceptive door nameplate or all vehicles allowed a teria outlined in VMC	ed floor space of mai s. Please submit floor permitted (off-street p welling. when the product to freestanding sign not associated with home 20.860	eighborho is mainta Checklist n and acc plan of h arking m be sold is to excee	nod properties. ined or, if applications on file. Visit cessory building nome indicating the sclearly incide ed 2 sq ft is perrections.	cable, a valid tour <u>City's Bur</u> gs or 1,000 sq g area to be und). The person ntal to the sernitted (refer to	City business siness License page ft (whichever is less) sed for home providing the rvices authorized.
I have read the above and agree to comply with the requirements.						
Applicant Signature					ate:	
HOC SUBMITTAL REQUIREMENTS						
Signed and dated Application Form (email to cddplanning@cityofvancouver.us)						
Floor plan inc	dicating area to be u	sed for home occupa	ation (ref	fer to #3 above	e)	
Fee paid via ePermits. Provide ePermits user name (Request an ePermits Account)						