

CHECKLIST FOR CUSTOMER
Home Occupation
(LDO Section 6.4.4)

The following material must be submitted with a request for a home occupation. **Check off each item as you include it in your application.**

1. **A to-scale plot plan** (ie: 1"=100' or 1"=50') on 8 ½ x 11 paper is included in this application.
 - The plot plan includes all relevant information outlined on the plot plan instruction form included in the Type 1 application. Met_____
 - The plot plan shows the structure where the home occupation will be conducted. Met_____
 - The plot plan shows additional parking when required. Met_____
 - If required, the plot shows the parking spaces measure 9'x17'. Met_____
 - If applicable, the plot plan shows the sign no greater than 3 square feet, is located flush with the side of the primary structure and, if illuminated, is indirectly illuminated. Met_____
2. **Zoning:** The zoning district is identified. Met_____
3. **Proposal:** The home occupation is described in detail. Met_____
4. **Location:** The structure where the home occupation will be located has been identified. Met_____
5. **Signature:** The cover sheet and the supplemental application are signed. Met_____
6. **Checklist:** This checklist is included with the application. Met_____

TYPE 1 REVIEW: HOME OCCUPATION

(LDO Section 6.4.4)

APPLICANT'S SUPPORTING INFORMATION

On the following page describe how your application complies with Section 6.4.4.

Home Occupation

The purpose of a home occupation is to make a profit in money. Standards established for home occupations are designed to permit the limited conduct of a business within a residential dwelling, attached or detached garage, or accessory structures in rural areas without adversely impacting the surrounding area. The standards are also intended to ensure compatibility with other permitted uses and with the residential character of the property.

Please answer the questions provided below in detail so that Staff can determine if the applicable standards are met.

1) Home occupations that comply with the regulations of this Section may be allowed in all zoning districts, except within accessory dwelling units.

a) What zoning district is the subject property in?

Answer: The property is located within the _____ zoning district.

b) Where will the home occupation be conducted?

Answer: The home occupation will be conducted within _____
_____.

2) Some uses by their nature have characteristics that are more suited for commercial or industrial districts. Therefore, the uses with the characteristics specified below will not be permitted as home occupations:

- Auto or vehicle oriented (repair, painting, detailing, wrecking, transportation services, or similar activities);
- Retail sales or professional services, other than by appointment only; and
- Large appliance repair.

a) Are you proposing to conduct a business similar to the businesses described above?

Answer: YES _____ NO _____

b) What is your proposal? Describe your proposal in detail.

Answer: _____

(continued)

3) Where a home occupation is a lawful use, one (1) sign is permitted in addition to any signage otherwise permitted. The sign will be limited to three (3) square feet in area, mounted flush with the side of the primary structure and may be indirectly illuminated.

a) Will you have a sign on the property advertising the home occupation? (check one)

Answer: YES _____ NO _____

b) If your answer is yes, do you agree to limit the size of the sign to three (3) square feet in area, mount the sign flush with the side of the primary structure and, if illuminated, indirectly illuminate? (check one)

Answer: YES _____ NO _____

4) The home occupation use will not result in more than two (2) additional vehicles parked at the site of the home occupation at any given time. Any need for parking created by the conduct of a home occupation will be met off-street in a location other than in a required front yard setback, and in compliance with the standards in Section 9.4. In no event may the home occupation displace required parking on the site without replacement in-kind.

a) Will the home occupation require additional parking?

Answer: _____

b) If your answer is yes, please explain how parking will be provided and show the location of the parking on your site plan.

Answer: _____

c) Do you agree that no more than two (2) additional vehicles, related to the home occupation, will be parked on-site at any given time? (check one)

Answer: YES _____ NO _____

5) In no way will the appearance of the structure be altered or the home occupation conducted in a manner that would cause the premises to differ from its residential character either by the use of colors, materials, construction, lighting, signs, or the generation/emission of sounds, noises, fumes, glare, or vibrations, using normal senses and taking measurements from any lot line of the parcel

a) Do you agree not to alter the structure in such a manner that would cause the property to differ from its residential character? (check one)

Answer: YES _____ NO _____

6) Electrical or mechanical equipment that creates visible or audible interference in radio or television reception or causes fluctuations in line voltage outside of the home occupation will be prohibited.

- a) Does the proposed home occupation require the use of electrical or mechanical equipment? (check one)
Answer: YES_____ NO_____
- b) If your answer is yes, what type of equipment is required?
Answer:_____
- c) If you answer to 6 (a) is yes will electrical or mechanical equipment create visible or audible interference in radio or television reception or causes fluctuations in line voltage outside of the home occupation? (check one)
Answer: YES_____ NO_____

7) Home occupations will not store or warehouse, or use in their processes, materials which are Class 1 flammables as defined by the Uniform Fire Code.

- a) Will the proposed home occupation require the use of Class 1 Flammables? (check one)
Answer: YES_____ NO_____

8) The home occupation will be completely conducted within an enclosed building. There will be no outside storage, display of goods, materials, supplies or equipment of any kind related to the home occupation.

- a) Do you agree to conduct the home occupation within an enclosed building and not to have outdoor storage or display of any kind? (check one)
Answer: YES_____ NO_____

9) No persons other than residents of the premises will be engaged in a home occupation.

- a) Do you agree that no other persons other than the residents of the property will engage in the home occupation? (check one)
Answer: YES_____ NO_____

10) A home occupation within an urban unincorporated community or urban growth boundary will be conducted only within the enclosed dwelling unit or garage.

- a) Is the property where the home occupation is proposed within an urban unincorporated community or urban growth boundary? (check one)
Answer: YES_____ NO_____
- b) If your answer is **yes**, do you agree to conduct the home occupation within the dwelling or garage? (check one)
Answer: YES_____ NO_____ N/A_____

11) A home occupation outside an urban unincorporated community or urban growth boundary may be conducted within a garage, accessory structure, or lawfully permitted dwelling.

- a) If your answer to 10 (a) above is **no**, do you agree to conduct the home occupation within a garage, accessory structure, or lawfully permitted dwelling? (check one)
Answer: YES_____ NO_____ N/A_____

12) A home occupation may be subject to licensing when and if such a program is enacted by the County.

a) Do you agree to license your home occupation if such a program is enacted by the County? (check one)

Answer: YES _____ NO _____

APPLICANT (S) SIGNATURE: _____

AGENT SIGNATURE: _____

DEPARTMENT FILE NUMBER: _____

JACKSON COUNTY, OREGON

TYPE 1 APPLICATION

(Please print in black ink, or type all information except where a signature is required)

OFFICE USE ONLY	
File N ^o	_____
Fee Pd	_____
Receipt N ^o	_____
App. Type:	_____
App. Received by	_____
Date Received	_____
Zoning Confirmed by Staff:	_____

Legal description of subject property:

Township____ Range____ Section____ Tax Lot____ Acreage____
 Township____ Range____ Section____ Tax Lot____ Acreage____

Street Address of the Property: _____

What is the Zoning of the Subject Property? _____

Is the purpose of this application to complete a Measure 49 Approval? YES NO

NOTE: Applications for review and approval of all development proposals may be initiated by the property owner, purchaser under a recorded land sale contract, condemner who has been granted immediate possession by a court of competent jurisdiction, agent duly authorized in writing, or a public agency.

PROPERTY OWNER:

At Time Application is Submitted

APPLICANT:

If Other than Property Owner

Name: _____

Name: _____

Mailing Address: _____

Mailing Address: _____

City: _____

City: _____

State: _____ Zip: _____

State: _____ Zip: _____

Daytime Phone: _____

Daytime Phone: _____

E-Mail Address: _____

E-Mail Address: _____

AGENT:

If Other than Applicant

OTHER:

Specify: _____

Name: _____

Name: _____

Mailing Address: _____

Mailing Address: _____

City: _____

City: _____

State: _____ Zip: _____

State: _____ Zip: _____

Daytime Phone: _____

Daytime Phone: _____

E-Mail Address: _____

E-Mail Address: _____

IF AN AGENT, APPLICANT, OR "OTHER" IS ACTING ON BEHALF OF THE OWNER OR PURCHASER, A SIGNED STATEMENT OF OWNER AUTHORIZATION MUST BE SUBMITTED WITH THIS APPLICATION. THIS APPLICATION MUST BE ACCOMPANIED BY AN ACCURATE PLOT PLAN (MAP). SEE USER'S GUIDE FOR ASSISTANCE. THE BURDEN OF PROOF FOR APPROVAL OF AN APPLICATION RESTS WITH THE APPLICANT. YOU MUST PROVIDE DOCUMENTATION REGARDING THE PROPERTY AND APPLICATION CRITERIA IN SUFFICIENT DETAIL AND ACCURACY TO ENABLE THE DEPARTMENT TO FIND THAT YOUR APPLICATION COMPLIES WITH ALL APPLICABLE APPROVAL CRITERIA.

APPLICANT SUPPORTING INFORMATION

Describe your proposal: _____

Are Plans Attached? Yes No

THIS APPLICATION IS HEREBY SUBMITTED AND THE STATEMENTS AND INFORMATION HEREIN CONTAINED ARE IN ALL RESPECTS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

APPLICANT(S):

Print Name: _____

Print Name: _____

Signature: _____

Signature: _____

Date: _____

Date: _____

AGENT:

OWNER or CONTRACT PURCHASER:

Print Name: _____

(See Attached Form)

Signature: _____

Date: _____