

**CITY OF ROCKFORD
HOME OCCUPANT PERMIT APPLICATION**

DATE: _____

NAME OF APPLICANT _____

ADDRESS _____

TELEPHONE NUMBER _____

DRIVER' S LICENSE NUMBER _____

NATURE OF BUSINESS _____

LOCATION WHERE GOODS/PRODUCTS ARE MANUFACTURED _____

LOCATION WHERE GOODS/PRODUCTS ARE AT PRESENT _____

HOME OCCUPATIONS SHALL BE APPROVED BY THE ZONING ADMINISTRATOR, WHO MAY ISSUE AN APPROVAL UPON RECEIPT OF AN APPLICATION.

HOME OCCUPATIONS ARE GOVERNED BY SECTION 2.24 OF THE CITY CODE. THE UNDERSIGNED AGREES TO THE FOLLOWING CONDITIONS:

- 1. NO PERSONS OTHER THAN MEMBERS OF THE IMMEDIATE FAMILY RESIDING ON THE PREMISES SHALL BE ENGAGED IN SUCH OCCUPATION.**

- 2. THE USE OF THE DWELLING UNIT FOR THE HOME OCCUPATION SHALL BE CLEARLY INCIDENTAL AND SUBORDINATE TO ITS USE FOR RESIDENTIAL PURPOSES BY ITS OCCUPANTS, AND NOT MORE THAN TWENTY (20) PERCENT OF THE FLOOR AREA OF THE DWELLING UNIT SHALL BE USED IN THE CONDUCT OF THE HOME OCCUPATION.**

- 3. THERE SHALL BE NO CHANGE IN THE OUTSIDE APPEARANCE OF THE BUILDING OR PREMISES, OR OTHER VISIBLE EVIDENCE OF THE CONDUCT OF SUCH HOME OCCUPATION, OTHER THAN ONE (1) SIGN, NOT EXCEEDING TWO (2) SQUARE FEET**

IN AREA, NON-ILLUMINATED , AND MOUNTED FLAT AGAINST THE WALL OF THE MAIN BUILDING.

- 4. THE HOME OCCUPATION SHALL BE OPERATED ENTIRELY WITHIN THE PRINCIPAL DWELLING AND NOT WITHIN ANY DETACHED ACCESSORY BUILDING OR STRUCTURE, AND SHALL NOT INVOLVE ANY RETAIL SALES.**
- 5. NO TRAFFIC SHALL BE GENERATED BY SUCH HOME OCCUPATION IN GREATER VOLUME THAN WOULD NORMALLY BE EXPECTED IN A RESIDENTIAL NEIGHBORHOOD AND ANY NEED FOR PARKING GENERATED BY THE CONDUCT OF SUCH HOME OCCUPATION SHALL BE MET OFF THE STREET AND OTHER THAN IN THE REQUIRED FRONT YARD.**
- 6. NO EQUIPMENT OR PROCESS SHALL BE USED IN SUCH A HOME OCCUPATION WHICH CREATES NOISE, VIBRATION, GLARE, FUMES, ODORS, OR ELECTRICAL INTERFERENCE DETECTABLE TO THE NORMAL SENSES BEYOND THE BOUNDARIES OF THE PROPERTY ON WHICH THE HOME OCCUPATION IS CONDUCTED. IN CASE OF ELECTRICAL INTERFERENCE, NO EQUIPMENT OR PROCESS SHALL BE USED WHICH CREATES VISUAL OR AUDIBLE INTERFERENCE IN ANY RADIO OR TELEVISION RECEIVERS OFF THE PREMISES, OR CAUSE FLUCTUATION IN LINE VOLTAGE OFF THE PREMISES.**

I HEREBY CERTIFY THAT THE FOREGOING IS TRUE AND CORRECT TO THE BEST OF MY ABILITY.

SIGNATURE OF APPLICANT

ZONING ADMINISTRATOR DATE