

**CARROLLTON TOWNSHIP**

**BUSINESS LICENSE APPLICATION FOR HOME OCCUPATION**

**NAME OF BUSINESS** \_\_\_\_\_

**OWNER'S NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**TELEPHONE NUMBER** \_\_\_\_\_

1. Is your business operated within the principle dwelling? \_\_\_\_\_
2. Does it have a separate entrance from outside the building? \_\_\_\_\_
3. Do you use any mechanical equipment except that which is used normally for purely domestic or household? \_\_\_\_\_
4. Do you use more than twenty-five (25%) percent of the total actual floor area of the dwelling for the business? \_\_\_\_\_
5. Is there displayed, or is there created outside the structure any external evidence of the operation of the home occupation? \_\_\_\_\_
6. Do you have an employee not living in the building? \_\_\_\_\_
7. How many off-street parking spaces are provided at your residence? \_\_\_\_\_

What is the nature of your business? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby declare that the following is a full and true statement.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_