



**PLANNING AND ZONING
DEPARTMENT**

**BUSINESS LICENSE
HOME OCCUPATION
PERMIT APPLICATION**

Stamp of Approval

Business Permit # _____ **UPC#** _____ **Community:** _____

PLEASE ANSWER ALL QUESTIONS - INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

Business Name (DBA) _____

NM CRS No: (Required) _____ - _____ - _____ - _____

Applicant: _____
Last First Middle Name

Property Owner Name: _____

Owners Mailing Address: _____

Business Physical Address: _____

Business Mailing Address: _____

Phone (_____) _____ Mobile Phone: (_____) _____

E-mail Address: _____

Describe Nature of Business: Sales Service Manufacturing Internet Food Other

- How many people, other than yourself will be working from the dwelling? _____
- Explain the activity in the dwelling unit: If the answer is "YES" please explain:
Will anything be manufactured or produced on the premises? ____ Explain _____
Will any merchandise be sold at the dwelling? ____ Explain _____
Will any merchandise be displayed at the dwelling? ____ Explain _____
Will any inventory be stored on the premises? ____ Explain _____
- Will any business activity be conducted outside in the yard, patio or garage of this dwelling? _____
Explain: _____
- Will there be any vehicles used in connection with this business activity? ____ Yes / No _____
What will the vehicles be used for? _____
- Will the operation of the business create external noise, vibration, glare, fumes, odors or other nuisances that could be detectable by neighbors? ____ Explain: _____
- Will the operation of the business involve painting, welding, fabricating, flammable materials or hazardous chemicals? ____ Explain: _____

7. Narrative: Describe nature and daily activity proposed, hours of operation, daily traffic generated, number of employees and future growth expected for the Home Occupation. _____
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Please read the following agreement before signing the application:

This application will be reviewed to determine if the proposed business activity meets the regulations permitted by this ordinance. In cases where the business activity distracts from the residential character of the neighborhood the application shall be referred to a class II use permit required by this ordinance. You will be required to complete a **Conditional Use Permit Application** to address the proposed business plan.

I understand that my signature indicates that all of the information contained on this application is true and correct. If any of the information submitted in this application is found to be fraudulent or in error, the Business License & Home Occupation may be revoked. If the conditions regarding the business activity changes in such a way that it becomes out of compliance with this ordinance the permits may be revoked.

Applicant: _____ **Date:** _____

Signature

FOR PLANNING DEPARTMENT REVIEW

Business License Permit No: _____ **Home Occupation Permit No:** _____

Planning Approval: _____ **Date:** _____

Comments or Conditions of Approval: _____

County Business License Fee \$35.00 Home Occupation Permit Fee \$50.00

HOME OCCUPATION PERMIT REGULATIONS

1. **NONTRANSFERABLE.** A HOME OCCUPATION PERMIT IS UNIQUE TO THE PROPERTY AND APPLICANT(S) LISTED AND IS NOT TRANSFERABLE TO ANY OTHER PERSON.
2. **DWELLING OR ACCESSORY FLOOR AREA.** A DWELLING UNIT OR ACCESSORY STRUCTURE MAY BE DEVOTED TO THE HOME OCCUPATION ACTIVITY.
3. **NO NUISANCE.** NO USE OF EQUIPMENT OR PROCESSES THAT CREATES; NOISE, VIBRATION, GLARE, FUMES, ODORS, OR ELECTRONIC INTERFERENCE DETECTABLE BY NEIGHBORS, SHALL BE PERMITTED
4. **TRAFFIC GENERATION.** NO TRAFFIC SHALL BE GENERATED BY SUCH BUSINESS ACTIVITY IN GREATER VOLUMES THAN WOULD NORMALLY BE EXPECTED IN A RESIDENTIAL NEIGHBORHOOD.
5. **NO EXTERIOR STORAGE OR DISPLAY.** NO DISPLAY OF GOODS OR EXTERNAL EVIDENCE THAT A HOME OCCUPATION EXIST ON THE PROPERTY, WITH THE EXCEPTION OF SIGNS.
6. **BUSINESS LICENSE REQUIRED.** THE APPLICANT FOR A HOME OCCUPATION SHALL BE RESPONSIBLE FOR OBTAINING AND KEEPING CURRENT A BUSINESS LICENSE WITH THE COUNTY.
7. **SECONDARY TO RESIDENTIAL USE.** A HOME OCCUPATION SHALL BE INCIDENTAL AND SUBORDINATE TO THE PRIMARY RESIDENTIAL USE AND SHALL NOT CHANGE OR DETRIMENTALLY AFFECT THE RESIDENTIAL CHARACTER OF THE DWELLING, OR THE NEIGHBORHOOD.
8. **SIGNAGE.** A HOME OCCUPATION ALLOWS FOR A 2X2 SIZE SIGN ON THE PREMISES WITH A SIGN PERMIT.
9. **UTILITY SERVICES.** A HOME OCCUPATION SHALL NOT REQUIRE INCREASING OR ENHANCING THE SIZE, CAPACITY, OR FLOW OF ANY UTILITIES SUCH AS, BUT NOT LIMITED TO; WATER, ELECTRIC, AND SEPTIC SYSTEMS. A CONDITIONAL USE PERMIT MAY BE NECESSARY IF UTILITIES ARE TO BE INCREASED OR ENHANCED FOR A HOME OCCUPATION ACTIVITY.
10. **PROOF OF OWNERSHIP.** PROVIDE WARRANTEE DEED OR LEASE AGREEMENT WITH PROPERTY OWNERS NOTARIZED SIGNATURE AUTHORIZATION TO CONDUCT BUSINESS ON PREMISES.
11. **SITE INSPECTION.** A SITE INSPECTION MUST BE CONDUCTED PRIOR TO APPROVAL
12. **PROOF OF NORTH CENTRAL SOLID WASTE AUTHORITY ACCOUNT.** TRASH ACCOUNT FOR RESIDENTIAL AND OR COMMERCIAL ACCOUNT IF NECESSARY.

PLEASE BE ADVISED THAT PRIOR TO APPROVING AN APPLICATION, STAFF MUST PERFORM AN INSPECTION OF THE PREMISES. A RE-INSPECTION MAY ALSO BE PERFORMED TO DETERMINE COMPLIANCE UPON RECEIPT OF ANY COMPLAINTS OF VIOLATION OF COUNTY ORDINANCE.

I have read the Home Occupation Permit Regulations to Conduct Business from my Residents.

Applicant Signature

Date