VILLAGE OF SHAWNEE HILLS
APPLICATION FOR CONDUCTING HOME OCCUPATION

FEE _____ DATE _____

NAME OF APPLICANT _____

MAILING ADDRESS _____

PHONE _____

NAME OF OWNER (IF OTHER THAN APPLICANT) _____

_____

ADDRESS _____

PHONE _____

PROPERTY WHICH APPLICATION APPLIES TO _____

DATE HOME OCCUPATION IS TO BEGIN OR STARTED _____

NATURE OF HOME OCCUPANCY _____

_____

_____

_____

EXPECTED LENGTH OF TIME OF HOME OCCUPATION _____

NUMBER OF PERSON INVOLVED IN SAID OCCUPATION _____

NAME OF BUSINESS _____

PERCENTAGE OF HOME OCCUPIED FOR BUSINESS _____

PERCENTAGE OF HOME OCCUPIED FOR RESIDENCE _____

FEE SHALL BE COLLECTED UPON SUBMISSION OF THIS APPLICATION

_____
SIGNATURE OF APPLICANT