



APPLICATION USE & OCCUPANCY PERMIT HOME OCCUPATION

Permit No. _____

APPLICATION MUST COMPLY WITH SECTION 155-109 OF THE CALN CODE

HOME OCCUPATION OR BUSINESS: _____

OWNER: _____

ADDRESS: _____

PHONE # _____

EMAIL _____

AREA OF RESIDENCE TO BE USED FOR OCCUPATION _____

OFF STREET PARKING PROVIDED: (A TOTAL OF FIVE (5) SPACES NEEDED)

NUMBER OF EMPLOYEES: _____

ZONING DISTRICT: _____ DATE: _____

APPROVED/DISAPPROVED ZONING OFFICER: _____

DEPARTMENT OF BUILDING & LIFE SAFETY

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