



**CITY OF KINGSLAND**  
**APPLICATION FOR HOME OCCUPATION PERMIT**

*This application is based on the requirements of Section 110 of the KLADO and must be filed with the planning and Zoning Administrator at least 4 weeks before the Planning Commission meeting at which it will be heard. Your presence or that of your representative is encouraged at the Planning Commission public hearing.*

APPLICANT: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

Type of use you are requesting:

- Home Office:** (requires planning director & city manager approval. Permit is valid for as long as the Home Office is located at the address stated herein.)
- Home Occupation:** (requires planning commission recommendation & city council approval. Renewal maybe required if complaints are filed.)
- Residential Business:** (requires planning commission recommendation & city council approval. Renewal maybe required if complaints are filed.)

GROUP/BUSINESS YOU REPRESENT: \_\_\_\_\_

STREET ADDRESS WHERE THIS USE IS TO BE LOCATED: \_\_\_\_\_

TAX MAP & PARCEL NUMBER: \_\_\_\_\_ ZONING: \_\_\_\_\_

OWNER OF SITE, IF NOT APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

***PLEASE COMPLETE AND ATTACH THE REQUIRED AFFIDAVIT FOR THE PARTICULAR TYPE HOME OCCUPATION YOU ARE APPLYING FOR. (THIS WILL BE FURNISHED BY THE PLANNING & ZONING DEPARTMENT.)***

**ATTACH REQUIRED HOME OCCUPATION PERMIT FEE TO THIS APPLICATION:**

HOME OFFICE	\$50.00
HOME OCCUPATION	\$50.00
RESIDENTIAL BUSINESS	\$50.00

**I UNDERSTAND THAT I AND/OR THE GROUP I REPRESENT CARRY THE BURDEN OF PROVING THE NEED FOR THIS PERMIT. FURTHER, I/WE AM/ARE RESPONSIBLE FOR THE CONDITION OF THE SITE WHILE THE PERMIT IS IN EFFECT.**

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_



**CITY OF KINGSLAND**  
**APPLICATION FOR HOME OCCUPATION PERMIT**  
**TO BE COMPLETED BY PLANNING & ZONING ADMINISTRATOR**

1. DATE COMPLETE APPLICATION FILED: \_\_\_\_\_

2. DATE APPLICANT NOTIFIED THAT COMPLETE APPLICATION HAD BEEN RECEIVED: \_\_\_\_\_

3. DATE PERMIT FEE PAID: \_\_\_\_\_ AMOUNT PAID: \$ \_\_\_\_\_

4. PLANNING COMMISSION REVIEW:

( ) APPROVAL RECOMMENDED ( ) DENIAL RECOMMENDED

DATE THIS APPLICATION WAS REVIEWED BY THE PLANNING COMMISSION: \_\_\_\_\_

CONDITIONS OF APPROVAL/REASONS FOR DENIAL: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. CITY COUNCIL ACTION:

( ) APPROVED ( ) DENIED

DATE THIS APPLICATION WAS REVIEWED BY CITY COUNCIL: \_\_\_\_\_

CONDITIONS OF APPROVAL/REASONS FOR DENIAL: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. DATE APPLICANT NOTIFIED OF FINAL ACTION: \_\_\_\_\_

**THIS APPLICATION FOR HOME OCCUPATION HAS BEEN APPROVED AND A BUSINESS LICENSE (WHEN COMPLETED APPLICATION HAS BEEN RECEIVED BY THE CITY) MAY BE ISSUED SHOWING A \_\_\_\_\_ PERMIT HAS BEEN ISSUED.**

\_\_\_\_\_  
PLANNING DIRECTOR  
CITY OF KINGSLAND

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CITY MANAGER  
CITY OF KINGSLAND

\_\_\_\_\_  
DATE