

Application for Home Occupation Permit City of Wheeling, West Virginia

The undersigned requests a Home Occupation Permit for the use specified below. Should this application be approved, it is understood that it shall only authorize the particular use described in this application and will be subject to any conditions or safeguards required by the Planning Commission.

Name of Applicant:	
Address:	
Phone Number:	Email:
Name and Address of Owner if different:	
Legal Description (attach copy of deed):	
Description of Home Occupation:	
Total Floor Area of Dwelling Unit:	Total Used for Home Occupation:
Hours of Operation:	Total Number of Employees:
Size of Sign:	_ Will customers visit the business: Yes No
Is <u>off-street</u> Parking provided? Yes No	If Yes, total number of parking spaces:
Supporting Information: Attach a narrative and v	vicinity map showing the property and layout.
It is the applicant's responsibility to insure compestrictions applicable to the subject property.	pliance with all state and local laws as well as deed
Applicant Signature:	Date:
Owner Signature:	Date:
Zoni	ng Official Use
Zoning District:	
Type of Home Occupation:	(Class I / Class II)
Public Hearing Date:	
Planning Commission Action: Approved	Denied
Zoning Official:	Date:

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Please describe in detail what type of business you plan on operating. Include information such as hours of operation, number of employees, if you will be storing inventory, supplies or chemicals, if you will be receiving deliveries, how you will advertise, if you will be having clients coming to your house, etc.	