



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 off-street Parking provided? Yes No If Yes, total number of parking spaces: _____

Supporting Information: Attach a narrative and vicinity map showing the property and layout.

It is the applicant's responsibility to insure compliance with all state and local laws as well as deed restrictions applicable to the subject property.

Applicant Signature: _____ Date: _____

Owner Signature: _____ Date: _____

*****Zoning Official Use*****

Zoning District: _____

Type of Home Occupation: _____ (Class I / Class II)

Public Hearing Date: _____

Planning Commission Action: Approved Denied

Zoning Official: _____ Date: _____

