

CITY OF HANFORD

APPLICATION FOR: HOME OCCUPATION PERMIT NO. _____

APPLICATION FEE: \$115.00	CITY OF HANFORD
RECEIPT NO:	COMMUNITY DEVELOPMENT DEPARTMENT
RECEIVED BY:	317 N. DOUTY STREET
DATE:	HANFORD, CA 93230 (559) 585-2581/ FAX (559) 583-1633

PART A: TO BE COMPLETED BY APPLICANT:

****LOCATION OF PREMISES FOR PERMIT:** _____

APPLICANT	PROPERTY OWNER	
	NAME	
	ADDRESS	
	CITY	
	PHONE	

PRESENT USE OF PREMISES: _____
 (EXAMPLES ARE: APARTMENT, DUPLEX, SINGLE FAMILY HOUSE, GARAGE, ETC.)

WHAT IS THE PROPOSED HOME OCCUPATION: _____

HOURS OF OPERATION: _____ DAYS OF OPERATION: _____

WHAT PART OF THE PREMISES & APPROXIMATELY HOW MANY SQUARE FEET WILL BE USED?: _____

FOR OFFICE USE ONLY

CONDITIONS SET FORTH: _____

PART B: ACKNOWLEDGEMENT:

I HAVE READ AND UNDERSTAND THE REGULATIONS GOVERNING HOME OCCUPATIONS WITHIN THE CITY OF HANFORD, AND I WILL CONDUCT SAID HOME OCCUPATION AT SET FORTH IN CHAPTER 17.40 OF THE HANFORD MUNICIPAL CODE. I ALSO UNDERSTAND THAT A CITY BUSINESS LICENSE IS REQUIRED AND MAY BE OBTAINED FROM THE CITY OF HANFORD FINANCE DEPARTMENT LOCATION AT 315 N. DOUTY STREET, HANFORD, CALIFORNIA. I FURTHER UNDERSTAND THAT FAILURE TO COMPLY WITH SAID REGULATIONS MAY LEAD TO THE REVOCATION OF THIS PERMIT.

 APPLICANT'S SIGNATURE

 DATE

 COMMUNITY DEVELOPMENT DEPARTMENT APPROVAL

 DATE