

## HOME OCCUPATION - I APPLICATION

1. Owner Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone #: \_\_\_\_\_ Facsimile #: \_\_\_\_\_
2. Applicant Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone #: \_\_\_\_\_ Facsimile #: \_\_\_\_\_

**Please read the entire application form prior to completion of this application.**

The use is intended to be allowed in all zone districts where residential uses and home occupations are permitted and for uses that have minimal impact on adjacent uses. The use shall be conducted within the residence only and shall not be allowed in any detached structure.

An application fee set by the Board of County Commissioners (Board) shall accompany this application.

The applicant shall provide two (2) copies and one (1) original document of the application and all of its attachments. After submittal, the Department will review the application and all attachments and prepare a Department Submittal Deficiency and Comment Letter (D & C Letter). The letter will state the submittal deficiencies, Department comments and or questions about the application, which must be addressed by the applicant.

Any application which is not complete or does not include all minimum submittal requirements will not be accepted by the Fremont County Department of Planning and Zoning (Department). Further, any application that is inadequately prepared, or is incomplete, may be subject to postponement.

Attachments can be made to this application to provide expanded narrative for any application item including supportive documentation or evidence for provided application item answers. Please indicate at the application item that there is an attachment and label it as an exhibit with the application item number, a period and the number of the attachment for that item (*as an example, the first attached document providing evidence in support of the answer given at application item number 1 would be marked - Exhibit 1.1, the fifth attached document supporting the narrative provided for application item 1 would be marked - Exhibit 1.5*).

For specific regulatory requirements the applicant should refer to the appropriate sections of the Fremont County Zoning Resolution (FCZR) which can be viewed on the Internet at:

<http://www.fremontco.com/planningandzoning/zoningresolution.pdf>

3. Address of home occupation: \_\_\_\_\_

4. Legal description of home occupation property: \_\_\_\_\_

\_\_\_\_\_

5. What is the acreage of the home occupation property? \_\_\_\_\_

6. What is the property zoned? \_\_\_\_\_

7. Explain in detail what the home occupation use is: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. What use classification most closely fits the proposed home occupation use? \_\_\_\_\_

If the specific use is not listed what similar use does the proposed home occupation most closely fit and how is it similar? \_\_\_\_\_

\_\_\_\_\_

*Note: The proposed home occupation I may include the following uses or any similar use as may be determined by procedures outlined in the Fremont County Zoning Resolution: art studio, beauty parlor, barber shop, dressmaking, photography services, telephone marketing, dog grooming, paint striping, nail salons, family child care home (eight [8] or fewer children, not including the residents' children) and professional offices, (i.e. legal, medical, dental, surveying, engineering, architectural, planning, accounting, insurance).*

*Note: A home occupation I shall not be interpreted to include the following or any similar use: retail store, nursing home, hospital, medical clinic, veterinary premises, kennel, school, restaurant, lounge, financial institution, vehicle or boat repair shop, paint shop, machine shop, carpentry shop, upholstery shop, museum, rafting office, boarding and rooming house, bed and breakfast.*

9. Explain why the use will have a minimal impact on adjacent uses: \_\_\_\_\_

\_\_\_\_\_

10. Explain why the use will be clearly incidental and secondary to the use of the residence for dwelling purposes: \_\_\_\_\_

\_\_\_\_\_

11. Explain why the use will not change the character or give an outward appearance nor manifest any characteristic of a business: \_\_\_\_\_

\_\_\_\_\_

12. Will there be any exterior advertising? \_\_\_\_\_ If yes, what will be the dimensions of the sign?

*Note: The sign shall not be any larger than two (2) square feet and shall not be illuminated.*

13. Will there be any employees other than the inhabitants of the residence? \_\_\_\_\_ If yes, how many are anticipated? \_\_\_\_\_

*Note: The home occupation use shall be conducted by the inhabitants living in the principle dwelling and there shall be no more than one (1) employee.*

14. Will the employees work in the house? \_\_\_\_\_

15. Will customers come into the house? \_\_\_\_\_

16. Is the property serviced by a public sanitation district? \_\_\_\_\_ If yes, provide name of sanitation district and provide documentation from the appropriate district which confirms that the property is serviced by the public sanitation district. Attach documentation and mark as Exhibit HO-16.1.  An exhibit has been attached.

17. Is the property serviced by an onsite wastewater treatment system (septic system)? \_\_\_\_\_ If yes, provide documentation that a permit has been issued and approved by the Fremont County Environmental Health Office. Attach documentation and mark as Exhibit HO 17. 1.  An exhibit has been attached.

18. Will the home occupation increase the amount of wastewater being discharged into the onsite wastewater treatment system (septic system) i.e., (additional children at a family child care home, a barber, beauty shop or pet grooming facility, etc.)? \_\_\_\_\_ If no please explain why not \_\_\_\_\_

19. Will any materials, fluids, etc. related to the proposed home occupation be discarded into the public sanitation system or the onsite wastewater treatment system (septic system) i.e., (photographic chemicals from a photography studio, floor drains in a vehicle repair shop, etc.)? \_\_\_\_\_ If yes please list the types of material or fluids. \_\_\_\_\_

Note: The use of the residence for the home occupation may result in additional requirements as per the Fremont County Environmental Health Office Regulations. Prior to submission of a home occupation application you may want to contact the Fremont County Environmental Health Office to determine if there will be any additional requirements.

20. What is the square footage of the residence? \_\_\_\_\_ sq. ft. What is the square footage of the area to be devoted to the home occupation? \_\_\_\_\_ sq. ft.

Note: The use of the residence for the home occupation may result in additional requirements as per the Fremont County Building Code. Prior to submission of a home occupation application you may want to contact the Fremont County Building Department to determine if there will be any additional requirements.

21. Will there be any sales of stocks, supplies or products? \_\_\_\_\_ If yes, give a description of the products to be sold: \_\_\_\_\_

*Note: Only incidental sale of stocks, supplies or products is permitted to be conducted on the premises.*

22. Will there be any storage of materials or equipment used as part of the home occupation? \_\_\_\_\_ If yes, please describe the type of materials and or equipment to be stored as part of the home occupation and the location where they will be stored: \_\_\_\_\_

*Note: There shall be no exterior storage on the premises of material or equipment used as a part of the home occupation.*

23. How many off-street parking spaces will be provided? \_\_\_\_\_ Spaces. What are the dimensions of the area designated for parking? \_\_\_\_\_ Will there be adequate parking to accommodate the home occupation? \_\_\_\_\_

24. Will a commercially licensed vehicle, or a vehicle containing equipment or advertising the home occupation, be parked on the premises? \_\_\_\_\_

*Note: No more than one (1) commercially licensed vehicle or vehicle containing equipment or advertising, may be parked on the premises related to the home occupation.*

25. Will the home occupation use require the use of any mechanical equipment which is not normally used for purely domestic or household purposes? \_\_\_\_\_ If yes, please specify what type of equipment will be used in association with the home occupation: \_\_\_\_\_

*Note: All equipment used in conjunction with the home occupation, shall not create noise, dust vibration, glare, fumes, odors or electrical interference detectable to the normal senses off the property. No equipment or process shall be used which creates visual or audible interference in any radio or television receiver or causes fluctuations in line voltage off the premises.*

26. Will there be more than one (1) home occupation conducted in or on the same premises? \_\_\_\_\_

If yes, please note the use(s): \_\_\_\_\_

*Note: The cumulative affect of more than one home occupation shall not exceed any of the requirements of the Home Occupation I.*

27. A list identifying all agencies of local, state and / or federal government that will require a permit, license or the like to be issued for all or part of the activity that comprises the proposed use and a summary of the status of all applications, along with copies of such applications, permits, licenses or the like and the contact person at the respective agencies (mailing address, telephone number, email address), packaged as one item and marked as Exhibit HO-27.1 and so on.  An exhibit has been attached. *(NOTE: The Owner, if granted approval, shall comply with all laws and regulations of the County of Fremont, its agencies or departments, the State of Colorado, its agencies or departments, and the United States of America, its agencies or departments, as now in force and effect or as the same may be hereafter amended. Further, the Owner shall obtain and keep in effect all other permits, licenses or the like, required by any other governmental agency and as otherwise may be required by Fremont County. Revocation, suspension or expiration of any such other permits, licenses or the like, shall revoke, suspend or terminate the Home Occupation, as the case may be.)*

28. The applicant shall provide any other information as may be required by the Department so as to determine the impacts of the proposed Home Occupation and whether or not approval of the same is appropriate.

29. Has the application fee been paid? \_\_\_\_\_ Cash \_\_\_\_\_ Check Number \_\_\_\_\_

Approval of this Home Occupation Application does not guarantee or assure compliance with the requirements of the Building Code of Fremont County, the Environmental Health requirements, any Federal, State or Local agency which may require a permit, or any requirements of the various utility companies etcetera, which may require service to this home occupation. You have the responsibility and obligation to assure compliance with any other agencies etcetera.

**By signing this Application, the Applicant, or the agent/representative acting with due authorization on behalf of the Applicant, hereby certifies that all information contained in the application and any attachments to the Application, is true and correct to the best of Applicant's knowledge and belief.**

**Fremont County hereby advises Applicant that if any material information contained herein is determined to be misleading, inaccurate or false, the Board of Commissioners may take any and all reasonable and appropriate steps to declare actions of the Department regarding the Application to be null and void.**

**Signing this Application is a declaration by the Applicant to conform to all plans, drawings, and commitments submitted with or contained within this Application, provided that the same is in conformance with the Fremont County Zoning Resolution.**

\_\_\_\_\_  
Applicant Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

**Home Occupation Classification:** \_\_\_\_\_

**Job #** \_\_\_\_\_ **Owners Name:** \_\_\_\_\_

**Date of property inspection:** \_\_\_\_\_

**Items found on-site by Authorized County Representative:** \_\_\_\_\_

**Authorized County Representative's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Approved:** \_\_\_\_\_ **By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Disapproved:** \_\_\_\_\_ **By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

**Copy to Assessor's Office date:** \_\_\_\_\_ **By:** \_\_\_\_\_