17

Address

HOME OCCUPATION APPLICATION

Planning & Zoning Department – City of Escanaba

906-786-9402 - permits@escanaba.org - 410 Ludington St. Escanaba, MI 49829

PROPERTY IDENTIFICATION Parcel

HOME OCCUPATION. A home occupation is a use accessory to the dwelling in which it is housed. Such a use may constitute either entirely or partially the livelihood of a person living in the dwelling. They shall comply with all applicable performance standards set forth in relevant sections of the City of Escanaba Zoning Ordinance.

| | | ections of the City of Escanaba Zoning Ordinand I FORMATION | ,e. |
|---|--------------|---|--------------|
| Occupation Description | | | |
| | | | |
| | | | |
| Is this the proprietor's primary residence? | ☐ Yes | Will there any business vehicles parked on | ☐ Yes |
| | □ No | the premises? | □ No |
| Will all business be conducted indoors? | ☐ Yes | Will more than two employees be on site? | ☐ Yes |
| | □ No | | \square No |
| Will there be any changes to the building's | ☐ Yes | Is business signage planned to be installed? | ☐ Yes |
| exterior or to the yard? | \square No | | \square No |
| Are there going to be more than 8 | ☐ Yes | Will sales or rental of any goods not related | ☐ Yes |
| customers visiting per day? | □ No | to the business be provided? | □ No |
| Will customer parking be off-street only? | ☐ Yes | Will any noise, vibration, or odor be | ☐ Yes |
| Will customer parking be on-street only: | □ No | detectable beyond the property line? | □ No |
| FEES | | | |
| Your total fee is based on your lot's area in acres. To find that amount, multiply the lot area by the indicated | | | |
| area factor, input that amount, add the base fee to it, then input the total fee. Maximum total fee is \$250. | | | |
| Lot Area (i.e.: 0.164) Area Factor | Area Fee | Base Fee Total Fee | |
| Fee = X \$300 = | Ť | + \$50 = \$ | |
| CONTACT INFORMATION & AGREEMENT | | | |
| We, the undersigned, hereby apply for a Change of Use Zoning Permit and certify that the | | | |
| information submitted is accurate. Any permit issued upon a false statement of any fact which is | | | |
| material to the issuance hereof, shall be void. | | | |
| If any of these entities are a company and not an individual, write: "Company Name (Contact's Name)" Owner Name Email | | | |
| | | | |
| Address, City, State, ZIP | | Phone | |
| | | | |
| Signature Date | | | |
| | | | |
| Applicant or Representative (if not the Owner) Name | | Email | |
| Address, City, State, ZIP | | Phone | |
| Address, City, State, ZIP | | Priorie | |
| Signature | | Date | |
| | | | |
| ************************************** | | | |
| Date Submitted | | | oning Code |
| Application correct? Yes No | | | |

You may submit this form in person, by USPS, or by email. Please make checks payable to "City of Escanaba". Credit cards may be accepted in-person or by phone; an additional processing fee applies.

Effective 7/01/2023 Page **1** of **1**