



Type of Review Requested (check all that apply)

- Administrative Determination
- Business Permit
- Certificate of Compliance
- Home Occupation
- Mobile Food Unit
- Lot Line Adjustment
- Simple Lot Split
- Temporary Use
- Time Extension/Renewal
- Transient Merchant License
- Other _____

STAFF USE ONLY:

File number(s): _____

Project name: _____

Received by: _____ Date received: _____

Related files: _____

Subject Property Information

Address: _____ Parcel Number(s): _____

Subdivision: _____ Block: _____ Lot: _____ Acreage: _____ Zoning: _____

Prior Use of the Property: _____

Proposed Use of the Property: _____

Applicant Information:

Applicant Name (Business Owner): _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Cell: _____

Property Owner Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Cell: _____

Agent Name: (e.g., architect, engineer, developer, representative) _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Cell: _____

Authorization

Print applicant name: _____

Applicant Signature: _____ Date: _____



CITY OF
Caldwell, Idaho

Planning & Zoning
HOME OCCUPATION

Project Name:	File #:
Applicant/Agent:	

Applicant (v)	Please provide the following REQUIRED documentation:	Staff (v)
	Completed & signed Administrative Review Application	
	Narrative fully describing the proposed use/request	
	Recorded warranty deed for the subject property	
	Signed Property Owner Acknowledgement (if applicable)	
	Vicinity map, showing the location of the subject property	
	Site Plan	
	The following are suggested items that may be shown on the site plan:	
	• Property boundaries of the site	
	• Existing buildings on the site	
	• Parking stalls and drive aisles	
	• Sidewalks or pathways	
	• Fencing	
	Floor Plan	
	Completed & signed Statement of Compliance	
	Fee	

The applicant shall comply with City Code: Chapter 10-02-09 at all times. Any violations of City Code, including but not limited to: hours of operation, signage, garbage accumulation, excessive noise and/or disturbances, shall render any approvals null and void

P&Z STAFF USE ONLY:

Start Date: _____ End Date: _____

Comments: _____

Reviewed by: _____



CITY OF
Caldwell, Idaho

Planning & Zoning

HOME OCCUPATION
STATEMENT OF COMPLIANCE

Home Occupation Information

Address: _____

Square footage of the house: _____ Square footage of areas to be used for the Home Occupation: _____

List all rooms to be used for the Home Occupation: _____

Storage of any goods and/or equipment on site? Yes No If "yes", what items and where will they be stored:

Will there be production of any article on site that will be offered for sale? Yes No

If "yes", what type of item(s): _____

No article shall be sold or offered for sale as part of the Home Occupation, except for such articles that are produced by those operating the Home Occupation.

Home Occupation Allowable Uses

Mark the use that most closely resembles the proposed Home Occupation

- | | | |
|---|---|--|
| <input type="checkbox"/> Barber/Beauty Shop | <input type="checkbox"/> Bed and Breakfast | <input type="checkbox"/> Office- Medical, Dental |
| <input type="checkbox"/> Home & Business Services | <input type="checkbox"/> Office- Business, Professional | <input type="checkbox"/> Therapy, Rehabilitation |
| <input type="checkbox"/> Photographic Studio | <input type="checkbox"/> Studio- Art, Dance, Music, Voice | <input type="checkbox"/> Pet Grooming |

All Home Occupations must comply with Caldwell City Code Section 10-02-09. The applicant is solely responsible to review said section and by signing below certifies that they have read, understand, and will comply with all standards, terms, and requirements as listed in City Code and this application. Any non-compliance of any standards, terms, or requirements of Caldwell City Code will lead to revocation of the Home Occupation Permit.

Applicant's signature: _____ Date: _____

Applicant's printed name: _____ Phone #: _____

Property Owner Acknowledgement

I, _____, _____
(Name) (Address)

_____, _____
(City) (State)

being first duly sworn upon, oath, depose and say:

1. That I am the record owner, or authorized designee of the record owner of property located at

(Address)

and I grant my permission to:

_____, _____
(Name) (Address)

_____, _____
(City) (State)

to submit the accompanying application(s) pertaining to that property.

2. I agree to indemnify, defend and hold the City of Caldwell and its employees harmless from any claim or liability resulting from any dispute as to the statement(s) contained herein or as to the ownership of the property which is the subject of the application.
3. I hereby grant permission to City of Caldwell staff to enter the subject property for the purpose of site inspection(s) related to processing said application(s).

Dated this _____ day of _____, 20_____

(Signature)