



# Town of East Kingston, New Hampshire

## HOME OCCUPATION PERMIT APPLICATION

I herein make application to the Selectmen of the Town of East Kingston for a permit to operate a business at the location listed below, as provided for in the Zoning Ordinances Article XVI, "Home Occupations."

<b>DATE:</b>	<b>PROPERTY LOCATION &amp; ACREAGE:</b>	<b>MBL#:</b>
<b>APPLICANT'S NAME:</b>	<b>STREET/MAILING ADDRESS:</b>	<b>PHONE:</b>
<b>OWNER OF PROPERTY:</b>	<b>OWNER'S ADDRESS:</b> (if different from applicant's)	<b>PHONE:</b>
<b>BUSINESS NAME:</b>	<b>BUSINESS STREET/MAILING ADDRESS:</b>	<b>BUS. PHONE:</b>
<b>NATURE OF BUSINESS:</b>	<b>HOURS OF OPERATION:</b>	<b># EMPLOYEES:</b>

Fees:

Application Fee                    \$65.00 \_\_\_\_\_

Abutter Notification-Postage Cost + 10% \_\_\_\_\_

Legal Notice                        \$45.00 \_\_\_\_\_

TOTAL \_\_\_\_\_

PAID \_\_\_\_\_

Attachments:

Home Occupation Worksheet \_\_\_\_\_

Abutters List \_\_\_\_\_

Photographs of Premises \_\_\_\_\_  
(front and rear of property)

*\*Only fully completed applications with fees paid and all required attachments will be forwarded to the Planning Board.*

I declare that I am the owner or resident of the property for which this application is made. I declare that I understand that any permit issued under Article XVI may not be transferred to another, and that upon cessation of the business activities for which any permit is issued, that I shall immediately surrender such permit, and further I have read the provisions of Article XVI, and agree to comply with them, and to be subject to all its provisions.

I certify the above statements are true and accurate: \_\_\_\_\_  
Signature of Applicant
Date

**TOWN OF EAST KINGSTON, NEW HAMPSHIRE  
HOME OCCUPATION WORKSHEET**

**ARTICLE XVI A.**

*A Home Occupation is a professional or service occupation or business carried out from the home, which is clearly accessory and subordinate to the residential use of the property. A Home Occupation is the provision of a service and/or the production or selling of a product on the premises.*

NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_

BUSINESS STREET/MAILING ADDRESS: \_\_\_\_\_

NUMBER OF EMPLOYEES: RESIDENT: \_\_\_\_\_ NON-RESIDENT: \_\_\_\_\_ TOTAL: \_\_\_\_\_

GROSS FLOOR AREA (INCLUDING BASEMENT AND ACCESSORY STRUCTURES) OF THE DWELLING:  
\_\_\_\_\_

WILL THE BUSINESS BE LOCATED IN THE MAIN HOUSE OR AN AUXILIARY BUILDING?  
\_\_\_\_\_

GIVE A DETAILED DESCRIPTION OF THE OPERATION OF THE BUSINESS INCLUDING THE TYPES OF DELIVERIES EXPECTED, MATERIALS AND EQUIPMENT USED, NUMBER OF VEHICLES USED, HOURS OF OPERATION, AND AMOUNT OF PARKING AREA.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WILL A SIGN BE USED? IF SO, PROVIDE ITS DESCRIPTION: \_\_\_\_\_  
\_\_\_\_\_

**HOME OCCUPATION CHECKLIST**

- 1. Home occupation located in house or structure accessory to the dwelling unit.
- 2. Exterior of the building must not display any evidence of the business except a permitted sign.
- 3. Not more than 1 commercial vehicle kept overnight unless shielded from sight.
- 4. Adequate OFF STREET parking provided.
- 5. Business conducted by a resident of the premises.
- 6. Business MUST NOT emit SMOKE, DUST, ODOR, NOISE, GAS, FUMES, LIGHTS or REFUSE MATTER.
- 7. Business MUST NOT create hazardous traffic conditions.
- 8. Use of the dwelling must not be more than 25% of gross floor area (unless on a state road – 50%).
- 9. Not more than 2 non-resident employees (unless on a state road – 4 allowed).
- 10. A photograph of the front and rear of the residence must be submitted along with the application.
- 11. The building housing the home occupation must meet all applicable building and fire codes.
- 12. Provide a copy of property assessment card.

I certify the above statements are true and accurate: \_\_\_\_\_  
Signature of Applicant Date

