

ZONING PERMIT FOR HOME OCCUPATION

(Processing Fee due with application)

Date _____

Property Address _____

Parcel Identification Number _____

Applicant Name _____ Telephone _____

Applicant Address _____

Property Owner

Proposed Use (Type of Business and Name of Business)

Pursuant to Section 6-29-1145 of the South Carolina Code of Laws, is this tract or parcel restricted by any recorded covenant that is contrary to, conflicts with, or prohibits the activity described in this permit? ___ Yes ___ No

The applicant certifies information in this application is true and correct. If any information is false or misleading, the zoning permit shall be considered void.

Signature of owner or agent _____

(If agent, describe type of relationship.) Application will not be reviewed until ALL information is completed.

Home Occupations are permitted as accessory uses in homes in residential districts, provided they meet the above requirements and further provided that

1. There is no external evidence of the existence of such occupations other than one sign, not exceeding two square feet in area, non-illuminated, and mounted flat against the wall of the principal building.
2. No pedestrian or vehicular traffic shall be generated by such home occupation in greater volumes that would normally be expected in a residential neighborhood, and need for parking generated by the conduct of such home occupation shall be met off the street and other than in the require front yard.
3. No equipment or process shall be used in such home occupation which creates noise, vibration, glare, fumes, odors, or electrical interference detectable to the normal senses off the lot, if the occupation is conducted in a single family residence, or outside the dwelling unit if conducted in other than single family residence.
4. No persons other than those residing in the home shall be engaged in the occupation. The occupation shall not involve the retail sales of merchandise or display of merchandise shall not be visible from the street.

OFFICE USE ONLY

Zoning District _____

Zoning Permit Approved _____ Denied _____ Temporary _____

Conditions/Reasons _____

Date _____

Zoning Coordinator/Designee _____

This permit shall also serve as a Certificate of Compliance of the City of Woodruff Zoning Code. If a request is denied, the property owner has the right to appeal within 20 days of this determination. Appeal forms are available in the Building & Zoning Department of the City of Woodruff, SC.

ALLOW 24 HOURS PROCESSING