



HOME OCCUPATION PERMIT APPLICATION

City of La Habra Community Development
110 East La Habra Boulevard, La Habra Ca 90631-5437
Phone: (562) 383-4100 Fax: (562) 383-4476

Application No.

Applicant: _____	Property Owner: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
Fax: _____	Fax: _____
Type of Business (Please explain) _____	

Please provide the following information.

- How many persons will be INVOLVED or EMPLOYED in the conduct of the proposed home occupation? _____ How many of these are Family Members? _____
Total _____
- What are the business days and hours of operation of the proposed home occupation?
Days _____ Time _____
- During any time of operation, what is the maximum percentage of the dwelling utilized for the occupation? _____ % The Garage? _____ Other Buildings? _____
- Describe any signs proposed relative to the home occupation:

- Describe any exterior, interior alterations to the dwelling or premise necessary to facilitate the proposed home occupation.

- Will accessory buildings or yard areas be utilized for the proposed home occupation?
Yes No
If yes, indicate what buildings/yards, and in what manner will they be used and how much floor space will be used. (i.e. garage, storage shed)

- Describe the mechanical and/or electrical equipment that will be necessary to the conduct of the home occupation, and will any chemicals be used: _____

8. Indicate the number of current on site parking spaces:
Garage_____Driveway_____Other_____ If Other Explain:_____

Will any of the above parking spaces be utilized for conduct or storage of materials in relation to the home occupation?

9. If trucks or other equipment will be used in your Home Occupation, where will they be stored?

10. Will the home occupation involve the use of commercial vehicles for delivery of materials to or from the premise? Days_____Time_____ If yes, please explain type and frequency of delivery.

11. Will customers/clients come to your dwelling unit for service or to obtain products connected with the proposed home occupation? Yes No
If yes, how many in any one day?_____

12. Is the proposed home occupation in conformance with the conditions, covenants and restrictions (C.C. & R.'s) pertaining to your property? Yes No

I have read and understand Section 18.60 of the La Habra Municipal Code, (Ordinance #1719) for the City of La Habra, and believe, to the best of my knowledge, that my proposed home occupation would not violate any provision of said code. I also believe to the best of my knowledge, that the information provided in this application is true and correct and further understand that any misrepresentation of the facts would invalidate this application.

Applicant's Signature_____Date_____

Property Owner's Signature_____

OFFICE USE ONLY

Received by:_____Date_____Fee_____

APPROVED

DENIED

Approval of this home occupation is contingent on the following conditions (if applicable):

1. _____
2. _____
3. _____
4. _____

This approval shall be valid for the life of the business approved to be conducted at this dwelling/premise and is nontransferable to any one or to any other location.

Reviewed by_____Title_____Date_____