



City of Johnson City Tennessee

601 East Main Street • P.O. Box 2150 • Johnson City, TN 37605 • (423) 434-6000

OFFICE OF RECORDER/TREASURER

Department of Finance Application for Home Occupation

The Johnson City Building Department will investigate and analyze your application.

Date: _____ Name of Business: _____
 Name: _____ Type of Business: _____
 Address: _____ Business Phone: _____
 Home Phone: _____

Provide a detailed description (1 or 2 paragraphs) of the proposed home occupation such as: 1) activities involved. 2) materials and equipment used, and 3) methods of operation. (You may write on the back of this page).

In addition, please respond to the following comments and questions:

- How many persons will be involved or employed in the conduct of the proposed occupation?
 Members of immediate family: _____ Others: _____ Total: _____
- What type of product will be produced, serviced, or repaired in the conduct of your home occupation? (for example, repair of clocks or watches, making jewelry, etc.) Explain: _____
- Describe any alterations to the home or premises that might be required to facilitate your home occupation? _____
- Describe what rooms will be used in the conduct of the home occupation and how these rooms will be used (for example: garage will be used to store supplies, or den will contain desk and file cabinets, etc.): _____
- Describe the mechanical and/or electrical equipment that will be necessary to conduct your activity? _____
- Describe how, where, and in what amounts the materials, supplies, and/or equipment related to your proposed occupation will be displayed or stored: _____
- Will people come to your home to obtain any product or utilize any service connected with the proposed home activity?
 Yes _____ No _____ If yes, please explain in detail: _____
- Are any signs necessary or proposed relative to the home occupation? Yes _____ No _____
 If yes, please describe type, size and location: _____
- If trucks or other equipment will be used in your home occupation, where will they be parked or stored?

- Will the home occupation involve the use of commercial vehicles for delivery of materials to or from the premises: Yes _____
 No _____ If yes, explain: _____
- Is your proposed home occupation in conformance with the conditions, covenants and restrictions pertaining to the property? Yes _____ No _____

I have read and understand the section concerning Home Occupation of the Zoning Ordinance and believe, to that knowledge, that my proposed Home Occupation would not violate any portion of said ordinance.

Applicant's Signature: _____ Title: _____ Date: _____

Property Owners Signature: _____ Date: _____

Owner Name (Printed): _____ Owner Phone Number: _____