



HOME OCCUPATION PERMIT

CITY OF SAN CLEMENTE
BUSINESS LICENSE APPLICATION
910 CALLE NEGOCIO, SUITE 100
SAN CLEMENTE, CA 92673

PLEASE CONTACT THE BUSINESS
LICENSE OFFICE FOR FILING
INSTRUCTIONS AT:
(949) 361-6166
businesslicense@san-clemente.org

GENERAL INFORMATION (All fields must be filled in. If one field does not apply, write "N/A")				
Business Name:		Business Phone No.:		
Owner/Entity (List Officers and Titles): _____		Alternate Phone No.:		
Email Address:				
Home Address:	Street:	City:	State:	ZIP:
Mailing Address:	Street:	City:	State:	ZIP:
Type of Ownership: <input type="checkbox"/> Sole Ownership <input type="checkbox"/> Partnership <input type="checkbox"/> LLP <input type="checkbox"/> Corporation <input type="checkbox"/> LLC				
Application Is For: <input type="checkbox"/> New Business <input type="checkbox"/> Change of Address, Ownership, or Business Name to Existing Business (Provide Details in Box Below)				
Write Previous Address, Ownership, or Business Name:				
Today's Date:		Business Start Date:		
Type of Business (Be Specific):				
State Contractor's License No.:				
FEIN:	SSN:	State Sales Tax ID:		

ACKNOWLEDGMENT TO BE COMPLETED BY OWNER(S) OR PRINCIPAL OFFICER(S)
I, the undersigned, understand that before I can operate my business in San Clemente, the establishment must comply with all applicable City departmental laws and regulations completely and must receive all necessary Federal, State and local permits. I also understand that a Business Tax Certificate issued pursuant to the provisions of San Clemente Municipal Code Title 5 - Business Licenses and Regulations, constitutes a receipt for the business tax paid and shall have no other legal effect. A Business Tax Certificate is a requirement, not a permit, to conduct, manage or carry on any business activity in the City. I declare that I am authorized to complete this application and that the information and statements provided are true and correct.
Signature: _____ Date: _____ Print Name/Title: _____

FOR OFFICE USE ONLY			
Business No.:	Received By:	Date Received:	
Business Tax: \$	Processing Fee: \$	Penalty Fee: \$	Total Due: \$
Notes:			



HOME OCCUPATION PERMIT APPLICATION

City of San Clemente
910 Calle Negocio, Suite 100
San Clemente, CA 92673
(949) 361-6166

Full Name of Applicant

Address of Home Occupation

Name of Business

Business Phone

Residence or Cell Phone

Legal Owner of Home

Address, if different

Signature of Legal Owner

Home Occupations are permitted in accordance with Section 17.28.160 of the City of San Clemente zoning ordinance when conducted as an accessory use to a primary residential use in any zoning district that specifies Home Occupation as a permitted use, subject to the conditions below. *Read and initial each condition to indicate your understanding of it. Please complete the back of the form. This application will not be accepted if it is incomplete.*

Minimum Standards*

(Applicant's
Initials)

- ____ a. Employees. Only the residents of the dwelling unit may be employed in the Home Occupation.
- ____ b. Equipment. Electrical or mechanical equipment which creates visible or audible interference in radio, television or telephone or causes fluctuations in line voltage outside of the dwelling unit shall be prohibited.
- ____ c. Location. Home occupations are only allowed within legal residential dwelling units in all zones. By initialing this item, the applicant states that the location of the home occupation is a legally-established residential dwelling unit and acknowledges that the City reserves the right to revoke this Home Occupation Permit if this is not accurate.
- ____ d. Noise. The home occupation shall not create noise or odors in excess of that normally associated with a residential use. Not motor power, other than electrically operated motors, shall be used in connection with home occupation, and the total combined horsepower of such electrical motors shall not exceed two (2) horsepower. The Home Occupation shall not cause an increase in vehicular traffic in the neighborhood.
- ____ e. Parking. The home occupation may be conducted in the garage but shall not use any space required for off-street parking.
- ____ f. Sales. No direct sales to customers of any item or service related to a home occupation shall occur on the premises. Indirect sales such as telephone sales, catalog sales, or sales of services to be performed away from the premises may be allowed.
- ____ g. Setting. The Home Occupation shall be conducted only within an enclosed structure; either the primary dwelling unit or a secondary structure on site. The appearance of the structure of premises shall not be altered to the extent that the structure or premises no longer resembles part or all of a residential structure. A Conditional Use Permit may be requested to conduct a home occupation in other than an enclosed structure. Exception: A home occupation consisting of swimming instruction for up to three (3) at one time may be conducted in an outdoor pool without a Condition Use Permit.
- ____ h. Signs. No signs for the home occupation shall be allowed.
- ____ i. Storage. No goods, supplies, equipment, materials or product related to the home occupation shall be stored outside, or be visible from outside any structure or unit conducting a home occupation.
- ____ j. Traffic. The dwelling unit shall not be the point of customer pickup or delivery, nor involve the use of commercial vehicles for delivery (except for commercial carriers), nor shall the home occupation cause an increase in vehicular traffic in the neighborhood.
- ____ k. Transferability. A home occupation granted in accordance with the provisions of this title shall not be transferred, assigned or used by a person other than the permittee, nor transferred to any location other than the one (1) for which the permit was granted.
- ____ l. Use. The home occupation shall be an incidental and accessory use and shall not change the principal character of the dwelling. The home occupation shall not involve more than twenty (20) percent of habitable dwelling floor area.
- ____ m. Utilities. The home occupation shall not involve the connection of utilities or use of community facilities other than customary for residential purposes.

Describe in detail the type of business to be conducted and *how the conduct of the business meets the conditions listed on the first page*, including the room to be used, equipment and supplies to be used, amount and location of storage, number of residents at the dwelling involved in the Home Occupation, how the product or service is to be sold (i.e., where and how contact is made with clients, etc. This statement will be utilized by the City to ensure compliance.

Notes:

No Transferability of Home Occupation Permit: A Home Occupation permit granted in accordance with the provisions of the Zoning Ordinance shall not be transferred, assigned or used by any person other than the permittee, nor be transferred to any location other than the one for which the permit was granted.

If you move to another location in San Clemente and wish to maintain your permit, you will be required to complete another application and pay the appropriate fee. If you have an additional home occupation business within the same structure of premises, this will require a separate application and fee.

Suspension and Revocation: Failure to comply with any application provision of the Zoning Ordinance of the City of San Clemente, or conducting a home occupation business in such a way that it becomes a public nuisance, shall result in immediate suspension of the permit, a misdemeanor fine of \$100, and/or revocation of the permit.

I HAVE READ AND UNDERSTAND THE CONDITIONS UPON WHICH HOME OCCUPATION PERMITS ARE GRANTED. I UNDERSTAND THAT THIS APPLICATION IS SUBJECT TO REVIEW BY THE CITY, AND THAT THE HOME OCCUPATION PERMIT AND BUSINESS LICENSE WILL BE ISSUED ONLY UPON THE APPROVAL OF THE CITY. I DECLARE UNDER PENALTY OF PERJURY THAT I SHALL ABIDE BY THE CONDITIONS GOVERNING THE HOME OCCUPATION PERMIT GRANTED TO ME.

Applicant's Signature

Date

FOR OFFICIAL USE ONLY

Application Date: _____

Business License#: _____

Type of Business: _____