



HOME OCCUPATION WORKSHEET

Please fill out this worksheet **COMPLETELY** on both sides, whether applying for the first time or submitting an annual renewal, and return it with your business license application.

OCMC 17.04.580 defines the restrictions on home occupations as follows:

"Home occupation" means an occupation carried on solely by the resident or residents of a dwelling unit as a secondary use, in connection with which no assistants are employed, other than residents of the home, no commodities are sold other than services, no sounds are heard beyond the premises, and there is no display, advertisement or sign board except such signs as by this title may be permitted in the district where the home or occupation is situated, including such occupations as lawyer, public accountant, artist, writer, teacher, musician, home office of a physician, dentist or other practitioner of any of the healing arts, or practices of any art or craft of a nature to be conveniently, unobstructively and inoffensively pursued in a residential dwelling or accessory building of a residence, and not more than one-half of the square-footage is devoted to such use. The business may have off-site employees or partners provided that they do not report for work at the subject residence. No outdoor storage of materials or commercial vehicles associated with the business shall occur on-site.

A home occupation is a business carried on by the resident of a dwelling as a **secondary** use, with the activity conducted so that there is no audible, visual or other appearance of a business. No on-site retail sales are permitted. The primary use must continue to be a residence. **Partners or employees are not allowed onsite for businesses purposes.** This means that the business must be conducted by the resident(s) and family members who **live** at the dwelling. In order to renew your business license, your home occupation statement must be reviewed annually.

A business license does not authorize the holder to conduct business in violation of any zoning ordinance or other state, federal, or local law.

Your signature below indicates that you have read and understand this worksheet, and that you agree to observe and comply with the restrictions for a home occupation as defined in the Oregon City Municipal Code (see above).

Signature: _____

Applicant Name: _____

Business Name: _____

Address: _____

Phone Number: _____

(Please complete reverse side)

Please describe your home business in detail. What activity is conducted at your home (phone calls, bookkeeping, storage, etc.)?

How long has your business been located at your home?

Does your business include retail sales from your home?

Yes No

Do you have regular business hours from your home for customers / clients?

Yes No

If "Yes", please indicate hours:

What is the approximate square footage of your home?

A. _____sf

What is the approximate square footage used for the business?

B. _____sf

What percent of the home is used for the business?

$(B \div A) =$ _____%

Is any part of your home business conducted outside?

(Note: The home occupation license does not allow outdoor storage.)

Yes No

If "Yes", please list activities performed outside:

How many employees work in the business? *(Count yourself as one employee)*

Do any employees live outside the home and travel to the home for employment purposes?

Yes No

If "Yes", please explain:

Do you intend to have a sign? (Signs larger than 2 square feet require a permit)

Yes No

NOTE TO HOME OCCUPATION APPLICANTS:

Completion of this worksheet and application for a business license does not imply approval of the home occupation. The business cannot begin until a City Business License has been issued. This form must be completed **ANNUALLY** in its entirety.

QUESTIONS? For verification of property zoning, please contact the Planning Division, at 221 Molalla Avenue, Suite 200, Monday through Friday between the hours of 8:30 AM and 3:30 PM or call (503) 722-3789.

THANK YOU FOR YOUR ASSISTANCE AND COOPERATION