



APPLICATION FOR BUSINESS LICENSE - HOME OCCUPATION

(This is NOT a Business License)

PERMITTED / NON-REGULATED USE

City of Holladay

4580 S. 2300 E.
Holladay, Utah 84117
Phone: (801) 527-3890
Fax: (801) 527-3891

APPLICATION # _____

*****PLEASE PRINT CLEARLY AND FIRMLY AND FILL OUT COMPLETELY*****

*****Please provide all items required within 30 days of this application submittal or this application is considered null and void.*****

Business Name/DBA: _____ Phone: _____ Fax: _____

Business Location (No PO Boxes): _____ Holladay, UT Zip: _____

Mailing Address (if different from above): _____ City/State: _____ Zip _____

E mail: _____

Local Agent/Contact Person: _____ Phone: _____ Fax: _____

Opening Date At This Location: _____ Is This a New Type of Business At This Location? Yes No

Business Activity/Type *: _____

**Does this business require any Utah State or Federal license or contract? If yes, please attach.*

TYPE OF OWNERSHIP

Sole Owner: Name: _____

Partnership: Name(s) of General Partners: _____

Corporation: Name of Principal Officer: _____

Name of Corporation: _____

Other: Describe: _____

Address of Owner(s)/Partner/Principal Officer: _____ City/State: _____ Zip: _____

Federal EIN #: _____ Utah State Entity (optional): _____

It is unlawful to operate a business without a current license (Holladay Municipal Ordinance Section 5.606.020). Failure to obtain a business license prior to opening such business will result in a penalty being assessed (Holladay Municipal Ordinance Section 5.06.100).

It is the responsibility of the Licensee to be familiar with the ordinances under which this license is applied, and applicant hereby agrees to conduct said business strictly in accordance with the Laws and Ordinances covering such business

All applications of business license are to be renewed yearly, on the anniversary date of original issue. Licenses renewed 30 days after the anniversary date of original issue will be assessed a penalty.

The Licensee is responsible for renewal each year. Failure to receive a renewal notice does not excuse this responsibility.

Signature*: _____ Print Name: _____ Date: _____

*****NO EMPLOYEES ALLOWED IN HOME BASED BUSINESSES*****

Office Use Only				License Fee: \$ <u>20.00</u>	
Category Fees & Codes:				Vehicles/Units: \$ _____	
Code	Description	Units	Amount	Zoning: \$ _____	
179	Home Occupation NRU		\$20.00	Total: \$ <u>20.00</u>	
Ncsalpha #: _____			<input type="checkbox"/> Zoning <input type="checkbox"/> Fire; Self-Inspection <input type="checkbox"/> Police <input type="checkbox"/> DBA <input type="checkbox"/> Fee		
Parcel ID #: _____			<input type="checkbox"/> Property Ownership Affidavit <input type="checkbox"/> Property Owner Approval and Applicant Agreement		
Zone _____			COMMENTS:		
Approving Signature _____					



City of Holladay Home Occupation Self-Inspection Fire Safety Report

This form is to be completed by the **applicant**.

Please read the **areas of inspection** carefully and check the boxes to confirm the statement's accuracy. If the statement is **not** accurate, please leave the box **unchecked**. Please refer to the explanation if needed.

Business Name: _____

Business Address: _____

Business Phone: _____ Contact Name: _____

AREAS OF INSPECTION	COMPLIANCE	EXPLANATION
Fire Protection Systems •Smoke detectors	<input type="checkbox"/> - Yes	-At least one smoke detector on every level.
Exit Doors/Hallways •Hallways/Doors are clear of obstructions	<input type="checkbox"/> - Yes	-All exit doors and hallways are to remain clear and free of obstructions: boxes, storage, deliveries, etc.
Extinguishers •Home extinguisher •Proper access •Automobile extinguisher	<input type="checkbox"/> - Yes <input type="checkbox"/> - Yes <input type="checkbox"/> - Yes <input type="checkbox"/> - N/A	-At least one 2A10BC extinguisher. Service every 5 years. -Display or mount extinguisher leaving free from obstruction. -If occupation requires work out of vehicle, (welding, painting, mechanic, etc.) extinguisher must be present in vehicle.
Storage •No storage in furnace room	<input type="checkbox"/> - Yes	-Storage of combustibles inside of the furnace room, or around the furnace is not permitted (paints, oils, wood, gasoline, etc)
Electrical Equipment •No permanent use of extension cords •Circuit breaker panel box clearance •No circuit breakers taped open •Electrical outlet covers	<input type="checkbox"/> - Yes <input type="checkbox"/> - Yes <input type="checkbox"/> - Yes <input type="checkbox"/> - Yes	-Extension cords shall not be used as permanent wiring for more than 3 days. Light strips and surge protectors are allowed. -Must maintain a 36" clearance around circuit breaker box. - Never tape circuit breakers open. -All electrical outlets and junction boxes shall have covers.
Miscellaneous •Home address must be posted •Portable space heater clearance	<input type="checkbox"/> - Yes <input type="checkbox"/> - Yes <input type="checkbox"/> - N/A	-Visible/legible address on house from the road on the front of the property. -If in use, keep combustible materials away from heaters.

I hereby certify that the information above is true and correct to the best of my knowledge.

Name of Manager/Owner: _____ Title: _____

Signature: _____ Date: _____

Please check this box only if you desire a fire inspector to come conduct a fire inspection at your property.



City of Holladay
Community Development Department
Zoning Application • Permitted/Non-Regulated Home Business • Fee included in Application

CONDITIONS OF ZONING APPROVAL FOR PERMITTED/NON-REGULATED HOME BUSINESSES

Home occupations that are non-regulated are a legal use permitted without a requirement to obtain a business license, with the following requirements:

1. **Business is conducted in the home by phone and/or mail as an office only.**
2. **There are no employees and no customers coming to the home.**
3. **No vehicles**, except the resident's personal transportation, equipment, or merchandise stock on the property.
Personal transportation means automobile or truck (one ton or smaller)
Equipment limited to a desk, drafting table, typewriter, home computer, answering service device, fax machine, and printer.
4. **Only persons residing in the home can be involved in the business at this location.**
5. **No accessory buildings can be involved** (e.g. detached garage).
6. **No signs are approved with this application.**
Separate zoning approval is required before posting any signs; signs must meet zoning requirements.

**NOTICE: FAILURE TO COMPLY WITH ANY OF THE ABOVE CONDITIONS MAY RESULT IN
LEGAL ACTION AND/OR REVOCATION OF YOUR BUSINESS LICENSE**

I agree to conduct my business in compliance with the above conditions: _____
Applicant's Signature

APPROVAL OF PROPERTY OWNER:

I, _____, am the owner/manager of the property listed below, and authorize the applicant, _____, to conduct business identified on this application at the specified property.

Property Owner/Manager's Signature

Date Signed

