



# Home Occupation Permit Application And Certificate of Occupancy Application

Home Occupation Permit – A home occupation is an occupation conducted within the dwelling portion of a building by the occupants of the dwelling unit. The proposed use must:

- Meets the definition of “home occupation;”
- Be compatible with the purpose and intent of the zone district; and
- Meet all requirements of the City’s Municipal Code.

### Other submittal requirements:

- Business License Application
- \$70.00 Business License Application Fee
- Business Tax Fee (Based on Business Type)

**\*\*\*Filing an application does not guarantee issuance of a Home Occupation Permit.\*\*\***

\*\*\*\*\*

Office Use Only

Fee Paid \_\_\_\_\_ Date Submitted: \_\_\_\_\_ By Staff Person: \_\_\_\_\_

Zone: \_\_\_\_\_ Case/Permit # \_\_\_\_\_ Planner: \_\_\_\_\_ Date Distributed: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

- 1. Business Name: \_\_\_\_\_
- 2. Business Address: \_\_\_\_\_
- 3. Assessor's Parcel Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
- 4. Parcel Size: \_\_\_\_\_ (acres) or \_\_\_\_\_ (square feet)
- 5. Zone District: \_\_\_\_\_
- 6. Land Use Designation: \_\_\_\_\_

**Contacts**

- 7. Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Email: \_\_\_\_\_
- 8. Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Email: \_\_\_\_\_

**Applicant's signature authorizes staff to enter the property described above for the purpose of inspection.**

I hereby declare under penalty of perjury that the information contained in this application and all attached materials are correct, true and complete. I acknowledge and agree that the City is relying on the accuracy of the information and my representations in order to process this application and that any permits issued by the City may be rescinded if it is determined that the information and materials submitted are not true and correct. I further acknowledge that I may be liable for any costs associated with rescission of such permits.

Applicant Signature	Print Name	Date
Property Owner Signature	Print Name	Date

**Office Use Only**

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_ Department: \_\_\_\_\_  
 Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_ Department: \_\_\_\_\_  
 Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_ Department: \_\_\_\_\_

Notes: \_\_\_\_\_

Approved: Yes    No \_\_\_\_

By: \_\_\_\_\_  

Signature
Name / Title
Date

## Business Description

(Attach additional sheets if necessary, referring to the question number)

1. Describe the home occupation/business. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. In what room of the dwelling will the business be conducted? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Describe any structural alterations required for the home occupation to occur. \_\_\_\_\_  
\_\_\_\_\_
4. Describe any special tools, equipment, materials, chemicals, etc. required for the business and where they will be stored. \_\_\_\_\_  
\_\_\_\_\_
5. Does the business produce any product(s) at the site which requires assembly, wrapping, compounding, labeling before delivery to customers? If so, please explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. How many employees work on-site? \_\_\_\_\_
7. How many of the employees are permanent residents of the dwelling? \_\_\_\_\_
8. Does this business maintain another site or office? Yes  No  If yes, indicate where.  
\_\_\_\_\_
9. Will customers / clients be coming to the home? Yes  No  If yes, answer the following questions:
  - a. How many customers at a given time? \_\_\_\_\_
  - b. Hours of operation? \_\_\_\_\_
  - c. By appointment? Yes  No
  - d. Where do the customers / clients park? \_\_\_\_\_
  - e. How many parking spaces are available on-site? \_\_\_\_\_
  - f. What activities will the customers be involved in at the home? \_\_\_\_\_

10. Describe any sales that will take place on the property. \_\_\_\_\_  
 \_\_\_\_\_
11. Describe your methods of advertising. (Vehicles are not allowed to display advertising when parked at the residence. Signs are also not permitted.)  
 \_\_\_\_\_  
 \_\_\_\_\_
12. Does the business require the use of a commercial vehicle(s)? Yes  No  If yes, please indicate where the vehicle(s) will be parked or stored. \_\_\_\_\_  
 \_\_\_\_\_
13. Does the business require a license from any other governmental agency, professional organization or trade group? Yes  No  If yes, what agency / organization? \_\_\_\_\_  
 \_\_\_\_\_
14. Does the business require the use of any chemicals or hazardous materials? Yes  No  If yes, please describe the specific chemicals or materials and how they are used. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
15. Will the business require truck deliveries or pickups? Yes  No  If yes, please describe the number and type of deliveries. \_\_\_\_\_  
 \_\_\_\_\_

\*\*\*\*\*

## Regulations Governing Home Occupations

### Municipal Code §14.50.030 and §5.04

The following regulations apply to Home Occupations within the City of Carpinteria:

- A home occupation (as defined by Municipal Code §14.08) shall be conducted within not more than one room of the dwelling portion of the residence.
- There shall be no structural alterations of the dwelling to accommodate the home occupation.
- The existence of the home occupation shall not be apparent beyond the boundaries of the property.
- The home occupation shall be conducted solely by the occupants of the home.
- There shall be no display of materials or goods on-site.

- The sale of commodities shall not be permitted on the premises.
- Advertising signs shall not permitted on the premises.
- There shall be no more than five customers, patients, students, or other persons served by the occupation upon the premises at any one time.
- A home occupation shall not create any radio or television interferences or create noise audible beyond the boundaries of the site.
- The home occupation shall not emit smoke or odors.
- There shall be no outdoor storage of materials related to the home occupation.
- No vehicles or trailers except those incidental to the residential use shall be kept on the site.
- A home occupation shall be strictly secondary and subordinate to the primary residential use and shall not change or detrimentally affect the residential character of the dwelling, the premises or the neighborhood.
- A City Business License shall be required as provided in Municipal Code §5.04.080.

Please be aware that the business may also require approval from one or more of the following agencies:

- Santa Barbara County Sheriff's Department (805-684-4561)
- County Air Pollution Control District (805-961-8800)
- County Environmental Health Services (805-684-4900)
- Carpinteria-Summerland Fire District (805-566-2451)
- Carpinteria Sanitary District (805-684-7214)
- Carpinteria Valley Water District (805-684-2816)
- County of Santa Barbara Clerk Recorder's Office (805-568-2250)