



**CITY OF HARRISONBURG
COMMUNITY
DEVELOPMENT**

HOME OCCUPATION PERMIT

<https://www.harrisonburgva.gov/home-occupation-permit>

Home occupation: Any occupation or activity which is clearly incidental to the use of the premises for dwelling purposes and which is carried on wholly within a main building or accessory building, other than business gardens as defined, by a member of a family residing on the premises, in connection with which there is no advertising on the premises, and no other display or storage or variation from the residential character of the premises, and in connection with which no person outside the family is employed and no equipment which is deemed to be in conflict with the intent of this definition. A home occupation shall not include beauty parlors, barber shops or doctors' or dentists' offices for the treatment of patients. The forgoing notwithstanding, providing professional counseling services by appointment only for not more than ten (10) clients per week, and giving music lessons shall constitute home occupations.

PROPERTY INFORMATION

Property Address _____

APPLICANT INFORMATION

Applicant Name _____

Telephone _____

Mailing Address (if different from property address) _____

E-Mail _____

City _____ State _____ Zip _____

BUSINESS INFORMATION

Name of business (if applicable): _____

Nature of business (What do you do?): _____

CERTIFICATION

By signing below, I certify that the occupation to be conducted in my home shall comply with the regulations as outlined above and understand that if it becomes and overburden to the neighborhood, i.e.: excessive traffic, noise, etc., my application may be subject to a complete re-evaluation.

APPLICANT SIGNATURE _____

DATE _____

TO BE COMPLETED BY PLANNING & ZONING DIVISION

ZONING DISTRICT: _____

APPROVED: _____ DISAPPROVED: _____

SHEET: _____ BLOCK: _____ LOT: _____

SIGNATURE/DATE: _____