

TOWN OF WINDSOR

Home Occupation Permit



Planning and Zoning
Administrator
(757)242-4288

Established 1902

Property Owner(s) _____ Owners Ph.# _____

Owners Mailing Address _____

Applicant (if different from Owner) _____ Ph# _____

E-Mail _____

Address/location of Subject Property _____

Tax Map Number _____ Zoning District _____ Parcel Size _____ Street Frontage _____

Type of Home Occupation and what activities will occur on the property? _____

How much area on the property will be used for the home occupation? _____

Will there be any employees other than family members residing on the property working for the business on the property? _____

Will the home occupation have a sign to advertise its activities? _____

How often will the general public and customers/clients be visiting the home occupation? _____

Will the home occupation cause any physical changes that require a building permit to the residence? If so what are they? _____

Name _____

(Print)

Signature (Applicant)

Date _____

STAFF USE ONLY- DO NOT WRITE IN THIS AREA

Fee Paid _____ Date _____ Approved _____ Denied (if denied reason for denial) _____

Signature/Title _____

Comments/Conditions to Home Occupation Permit

