

Community Development Department PO Box 2460 16345 Sixth Street La Pine, Oregon 97739

Phone: (541) 536-1432 Fax: (541) 536-1462

Email: info@lapineoregon.gov

Home Occupation Application

	File Number #	
PL	LEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED	
Name of	Business	
Applicant	t Name	
Address .		
1.	Please describe in detail your home business	
2.	What activity is conducted within the house	
3.	Is any remodeling or structural addition to the residence or accessory structure propos conjunction with the proposed home occupation Yes No a. If yes, please explain	ed in
4.	Does your business include retail sales from your home? Yes No a. If yes, please explain	
5.	List the number of customers/clients expected at the residence per day	



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6.	Do you have regular business hours from your home for customers/clients?
	Yes No No
	a. If yes, please explain
7.	Is any part of your home business conducted in a detached accessory building (garage, shed, shop, etc.) or performed outside on your property? Yes \(\square \) No \(\square \)
	a. If yes, please explain
	hereby have read, understand and agree that the operation
	business located at, prior parcel number T-15 - P-12 Section: Toy Let Zone
	or's parcel number T-15, R-13 Section: Tax Lot Zone Tax Account #, must be conducted in accordance with the Home Occupation
	ds as defined in the Zoning Code.
	vent of a complaint, the City may take any actions necessary to compel the business to in accordance with the Home Occupation regulations. Such actions may include, but
-	limited to citing the operator into court. By definition, a Home Occupation is secondar
to the p	rinciple use of the building, which is residential.
Signatu	re Date