

TOWN OF ELSMERE HOME OCCUPATION PERMIT APPLICATION

The business activity proposed at the following address must take place within the livable portion of the dwelling and must comply with the Code of the Town of Elsmere. Please complete the following fully and accurately. For more information, review Town of Elsmere Code Chapter 131 and Chapter 225 or contact the Code Enforcement Office during regular business hours at (302) 998-2215.

Site Address		Parcel Num	ber 19 -	-	
Applicant Information					
Applicant		Email Addr	ess		
Mailing Address		City, State,	Zip		
Phone		Fax			
Property Owner Information					
Property Owner		Email Addr	ess		
Mailing Address		City, State, Zip			
Phone		Fax			
Property Information					
Number of residents in the home	Number of	of relatives employed in the business			
Size of dwelling Square	Square Feet		Area to be used for business		
Describe any alterations to the dwelling or special ed	quipment ne	reded:			
Business Information					
Type of Business					
Name Business			DE License #		
A brief summary of the business to be conducted:					
Will customers visit this location? ☐ Yes	□ No	If yes, how many per day?			
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Will a vehicle be used in this business?	□ Yes	□ No	License Plate Number			
Vehicle Year, Make, Model, & Color						
Will materials used in the home occupati	nome or will products be picked up?	☐ Delivery				
				☐ Pickup		
If materials are delivered to the residence	e, how free	quently?		per month		
Will products be sold at the home?				□ Yes □ No		
If so, please explain.						
Will the home occupation be conducted e	entirely wit	thin the home	2?	□ Yes □ No		
If not conducted entirely in the home, ple	ase explai	n where else.				
Will the home occupation result in any in electrical interference?	ncrease in	noise, dust, v	ibration, glare, smoke, odor, or	□ Yes □ No		
Describe any alterations to the dwelling or special equipment needed.						
I hereby certify under penalty of perjury true to the best of my knowledge and tha Chapter 131 and Chapter 225. I further country to the business that I propose to conduct voided.	t my busin ertify that	ess will conf I understand	form to the requirements of the Town that any information provided on this	of Elsmere Code s application, pertaining		
Signature			Date			
Printed Name			Title			
Property Owner Affidavit As the legal owner of the listed property, permit and conduct the business in this a				ly for a home occupation		
Signature			Date			
Printed Name			Title			
		OFFICE US	SE ONLY			
Permit #			Date Issued			
Invoice #			Customer Code			