

This application/permit is needed if you plan to hire employees .

Fee: \$10.00 Non-refundable

### Town of Stoddard Home Occupation Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Location of Home Occupation: Stoddard Tax Map # \_\_\_\_\_ Lot # \_\_\_\_\_

Applicant has obtained a copy of Article IV, Commercial and Industrial Uses, #2 Home Occupations

Yes  No

How many resident members will be engaged in your Home Occupation? \_\_\_\_\_

How many employees do you plan to have working who are not resident members? \_\_\_\_\_

Describe **in detail** what the home occupation will entail:

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What changes do you plan to make to the structure or detached structure to accommodate your Home Occupation? \_\_\_\_\_

Do you plan to erect a sign? Yes  No

If yes, you must comply with the Stoddard Sign Ordinance (Community Planning Ordinance: Article XIV).

Does your deed restrict your proposed Home Occupation? Yes  No

**This application must be signed by a majority of the Stoddard Selectman to become valid! If the Selectmen determine this is not a Home Occupation under Article IV and falls under Commercial Usage, then this application will be denied.**

**The applicant/abutter has the option to appeal the decision to the Stoddard Zoning Board of Adjustment within 20 days (RSA 677)**

\_\_\_\_\_  
**Applicant** **date**

\_\_\_\_\_  
**Selectman** **date**

\_\_\_\_\_  
**Selectman** **date**

\_\_\_\_\_  
**Selectman** **date**