

# Home Occupation City of Wisconsin Rapids, Wisconsin Version: January 3, 2019

**Overview**: A home occupations is a small-scale business operated by the person living in a dwelling unit. Applications are reviewed by the Planning Director to ensure the proposed home occupation complies with all of the standards, including those listed in Appendix B of the zoning code for this land use.

**Governing regulations**: The procedures and standards governing the review of this application are found in Article 5 of the City's zoning code (Chapter 11 of the municipal code).

**General instructions**: Complete this application and submit one copy to the Community Development Department. Alternatively, you can submit your application online at <a href="https://wisconsinrapids.zoninghub.com/">https://wisconsinrapids.zoninghub.com/</a>

## Application fee: \$50.00

Application submittal deadline: Applications may be submitted at any time.

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Mandatory meeting with staff: To ensure that all the required information is provided and that there is a complete understanding of the process, the applicant must meet with City staff to discuss the request and necessary items. Please contact the Community Development Department to schedule an appointment.

#### 1. Applicant information

Applicant name	
Street address	
City, state, zip code	
Daytime telephone number	
Email	

2. Agent contact information Include the names of those agents, if any, that helped prepare this application including the supplemental information. Agents may include surveyors, engineers, landscape architects, architects, planners, and attorneys.

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	Agent		Agent 2
Name			
Company			
Street address			
City, state, zip code			
Daytime telephone number			
Email			
3. Type of project (select	t one)		
New project			
Amendment of prior app	proval (if any)		
If an amendment, the	date of last approval (if any):		
4. Subject property infor	mation		
Physical address			
Parcel number(s)			
	Note: The parcel number can be found Development Department.	on the tax bill for the prop	perty or it may be obtained from the Community

Wisconsin Rapids, WI 54495-2780 P: (715) 421-8228 Fax: (715) 421-8291

Office Use Only			
Date Received			
Received By			
Fee			
Case #			
Aldermanic District			
Plan Commission Date	NA		

Is the subject property currently in violation of the City's zoning ordinance as determined by the City's zoning administrator?

No

Yes

If yes, please explain.

**Comment:** Pursuant to Section 11.04.10 of the City's zoning code, the City may not issue a permit or other approval that would benefit a parcel of land that is in violation of the zoning code, except to correct the violation or as may be required by state law.

Are there any unpaid taxes, assessments, special charges, or other required payments that are specifically related to the subject property?

□ No

Yes

If yes, please explain.

**Comment:** Pursuant to Section 11.04.11 of the City's zoning code, the City may not issue a permit or other approval that would benefit a parcel of land where taxes, special assessments, special charges, or other required payments are delinquent and unpaid.

5. **Proposed use** Describe the nature of the proposed home occupation.

6. Attachments List any attachments included with your application.

7. Other information You may provide any other information you feel is relevant to the review of your application.

### 8. Mandatory meeting with staff

When did you meet with the Community Development Director?

Month/year

# 9. Applicant certification

- I certify that all of the information in this application, along with any attachments, is true and correct to the best of my knowledge and belief.
- I understand that submission of this application authorizes City officials and employees, and other designated agents, including those retained by the City, to enter the property to conduct whatever site investigations are necessary to review this application. This does not authorize any such individual to enter any building on the subject property, unless such inspection is specifically related to the review of this application <u>and</u> the property owner gives his or her permission to do so.
- I understand that this application and any written materials relating to this application will become a permanent public record and that by submitting this application I acknowledge that I have no right to confidentiality. Any person has the right to obtain copies of this application and related materials or view it online.
- I understand that the zoning administrator will review this application to determine if it contains all of the required information. If he or she determines that the application is incomplete, it will not be scheduled for review until it is deemed to be complete.

Property Owner:

Name – print

Name – Signature

Date

Name – print

Name - Signature

Date