



G R E A T E R S A L T L A K E

Municipal Services District

Home Occupation Compliance Review Checklist

The zoning ordinance allows you to use a portion of your home for a home business. You are required to establish and operate your home business in a manner which will not compromise your use of the home as your own and/or your family's primary residence nor adversely effect the residential character of the neighborhood in which your home is situated. The following questions are intended to aid in determining compliance with the standards set forth in Title 19 of the Zoning Ordinance.

1. Is your proposed home business of a type and size of operation that will allow you and your family, as well as other property owners in your neighborhood, to continue to feel that your home is primarily a residence and the home business is secondary to that use?

2. The ordinance requires that in order to establish a home business, you must reside in the dwelling at least nine months per year. Is the dwelling at which you will be conducting this home business your primary residence?

Note: Each Family member who participates in the home business is considered an employee for business license purposes. Excluding yourself how many family member employees will there be? _____

3. If your home is located on a street which is less than 80 feet wide then only yourself and members of your immediate family who also reside on a permanent year-round basis at your home may be employed or otherwise involved in any activities associated with the home business. If your home is located on a street which is wider than 80 feet, then, in addition to yourself and members of your immediate family who also reside on a permanent year-round basis at your home, you may have one non-resident employee which works at the residence.

Do you intend to have a non-resident employee?

If yes, is the street you live on 80 feet or wider?

Yes

No

Yes

No

4. Customers coming to the home must be conducted on an "appointment only" basis between the hours of 7:00 a.m. and 10:00 p.m. Will all services and sales activities associated with your home business be by appointment only and not designed to attract "off-the-street" customer traffic? Yes No

5. Changes to the outside of your home which would alter its residential appearance are not allowed. Do you plan on doing any remodeling to your home that would change its outward residential appearance?

Yes _____ No _____

Note: Violations of the standards set forth in Title 19 of the Zoning Ordinance may result in revocation of your business license as well as civil penalties as allowed under Title 19.

Signature of Applicant

Date

Attach Affidavit Form or Authorization for a Home Business within a Rental Unit



HOME BUSINESS "SELF" INSPECTION FORM

Business Name: _____ Date: _____

Business Address: _____

Business Owner: _____ Phone: _____

Type of Business: _____

For questions, please contact the Prevention Division at 801-743-7230

| <u>AREA OF INSPECTION</u> | <u>ITEMS TO INSPECT</u> | <u>COMPLIANCE</u> | |
|-------------------------------|--|--------------------------|--------------------------|
| | | YES | NO |
| 1. <u>Address</u> | Address numbers shall be a minimum of 4" in height and visible from street (free from bushes, shrubs, etc.) | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. <u>Exits/ Hallways</u> | All exit doors shall remain clear and free of obstructions; (Boxes, storage, deliveries, etc.) | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. <u>Fire Extinguisher</u> | A commercial "2A10BC" rated, "serviceable" type fire extinguisher is required to be mounted in common area of home/business. The extinguisher requires an annual certification inspection to be performed by a qualified service technician. | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. <u>Hazardous Materials</u> | Are you using or storing flammable liquids, combustible liquids or any other hazardous materials as part of the home business? (If YES, contact the Area Fire Marshal to see if a fire department inspection is required) | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. <u>Electrical</u> | Extension cords shall not be used as permanent wiring. Any open slots in the breaker panel shall have an approved "blank" placed in the open slot. All light switches, outlets and exposed junction boxes shall have approved covers. | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. <u>Smoke/CO Detectors</u> | Smoke detectors are required on every level of the home. Detectors shall be tested monthly and batteries replaced as needed. All homes should have at least one carbon monoxide detector. | <input type="checkbox"/> | <input type="checkbox"/> |

I hereby certify that the information is true and correct to the best of my knowledge.

_____ Business/Home Owner Signature

_____ Date