## **Home Business Permit**

## CITY OF THE DALLES

## Community Development Department

313 Court Street
The Dalles, OR 97058
(541) 296-5481, ext. 1125
Fax (541) 298-5490 www.thedalles.com

Date Filed _	
File #_	
\$65.00 application fee received	
Date Deemed Complete	
Approval Date_	

APPLICANT	<b>LEGAL OWNER</b> (If Different than Applicant)	
Business Name	Name	
Address	Address	
Telephone # Email address	Telephone #	
PROPERTY INFORMATION		
Address		
Map and Tax Lot		
Zone District/Overlay	No	
Waste Water Survey: Must be returned with	this application	
General Information: Describe current use o	f property	
Signature of Applicant	Signature of Property Owner* or Owners Agent	
	Date	



<sup>\*</sup> Notarized Owner Consent Letter may substitute for signature of property owner if applicant is not the owner.

## PERMIT INFORMATION

Describe the Home Business proposal, including location of the home business employees, storage and stored materials, sign, hours of operation, parking, and impacts:	
	_
STAFF REVIEW:	
Site Plan and/or vicinity plan information required:	
Waste Water Survey returned with application?	
Home Business Review Criteria met per Section 6.020, Ordinance 98-1222	
Other Information required (specify)	
DATE OF SITE VISIT: PLANNER:	
PLANNING APPROVAL:	
	Date

Note: Please remember to submit Sign Permit Application for new business signage.