



Development & Neighborhood Services Department
 100 S. Myrtle Avenue, Suite 210
 Clearwater, FL 33756
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 www.myclearwater.com

HOME OCCUPATION AFFIDAVIT

Property Owner	Business Owner / Property Address
Name	Name
Street	Street
City/State/Zip	City/State/Zip
Telephone: ()	Telephone: ()
Proposed Name of Business:	
Type of Business Proposed (Describe/Be Specific):	

Home Occupation Regulations Read Before Signing Below

1. **No sale of or trading in merchandise** which involves on-premise visits by customers shall be carried out from the property where the home occupation is located.
2. **No persons other than family members** residing within the dwelling unit shall be engaged in the occupation, unless the occupation is a service conducted away from the premises of the applicant, in which case additional employees may be engaged in the occupation **provided such employees meet at the site where the service is conducted and not at the home where the occupation is licensed.**
3. **No internal change** in the structural form of the building shall be necessary to accommodate the home occupation. The occupation shall be restricted to one room in the dwelling, and the floor area of such room shall not exceed 25 percent of the gross floor area of the dwelling; all material, equipment or facilities shall be kept therein, except that material, equipment or supplies used in the home occupation, other than on the premises may be stored in a totally enclosed motor vehicle which complies with the terms of Article 3, Division 14.
4. No occupation shall be conducted outside the dwelling unit or in any accessory building except as such occupation may be conducted from or dependent upon the utilization of motor vehicle. If a motor vehicle is used in conjunction with the home occupation, it shall be parked or stored consistent with all terms of Article 3, Division 14.
5. **Traffic generated by use shall be no greater in volume** than would normally be expected at a similar residence where no home occupation is conducted.
6. The occupation shall not involve the use of a commercial vehicle for delivery of materials to and from the premises except for travel from the home occupation site to a job location and to return, such trips not to exceed on the average of more than two trips per day.

7. **No marked vehicles or equipment** used in conjunction with the home occupation shall be parked on the property or contiguous street right-of-way so as to identify, advertise, or otherwise attract attention to the occupation.
8. **No occupation** shall be conducted or equipment or process associated with such occupation used which creates noise, vibration, glare, fumes, odors, dust, smoke or electrical interference detectable to the normal senses at the lot line or beyond the lot line if the occupation is conducted in a detached single-family dwelling, or beyond the exterior of any common walls in a joined or multiple-family dwelling. In the case of electrical interference, no equipment or process shall be used which creates visual or audible interference in any radio or television receivers off the premises or causes fluctuation in line voltage off the premises.
9. **No display of products, operations, signs or nameplates** shall be visible from outside the dwelling.
10. The use shall be **an occupation regulated by this Code** (City Code of Ordinances) and will otherwise comply therewith.
11. No home occupation shall involve the provision of day care services to more than four (4) children at any one time.

Home Occupation Affidavit

I, the undersigned affiant, do hereby swear and affirm that I am a resident of Clearwater, Florida, that I am the person responsible for the operation and conduct of the business named herein. I have read and understand the foregoing "Home Occupation Regulations" and agree to comply with the requirements contained therein. I understand that a violation of the Clearwater's occupational license ordinance or related ordinance may result in the revocation of my occupational license.

Signature of Affiant

SIGN WHEN NOTARY IS PRESENT

State of Florida:

County of Pinellas:

Before me, the undersigned occupant of the real property described in the foregoing instrument, personally appeared, _____, who is personally known to me and/or has produced _____ as identification.

WITNESS MY HAND AND SEAL, this _____ day of _____, _____ A.D.

Notary Public
My Commission Expires:
(SEAL)