HOME OCCUPATION EXEMPTION APPLICATION

Applicant Name:		
Business Name:		
Home Address:		Parcel Number(s):
Mailing Address (if different):		
Phone Number:	Cell Phone:	Email:
Description of Business:		

I hereby certify that my occupation qualifies for an exemption from the Home Occupations Permit regulations under Section 17.96.040 (B), Exemptions. My occupation is one of the following exempt activities. Check any/all that apply:

- ☐ Authors, composers and writers.
- ☐ After-hours paperwork and similar activities performed by residents on evenings and weekends, who have a primary office elsewhere.
- ☐ Services or activities that are not performed at the residence, such as newspaper delivery, babysitting, lawn care and gardening, parties for the sale of items such as Tupperware, Mary Kay, etc., and similar services, provided, however, such services may require a home occupation permit if activities related to the service otherwise qualify for a home occupation.
- ☐ Garage sales, subject to the requirements of Chapter 5.60 MVMC.
- ☐ For-Profit production of produce or other food products grown on the premises, within the R-A Residential Agricultural Zoning District. This may include temporary or seasonal sale of produce or other food products grown on the premises.
- ☐ Hobbies that do not result in payment to those engaged in such activity.
- ☐ Family Day Care facilities for 12 or fewer children, licensed by the Washington State Department of Social and Health Services.

By affixing my signature hereto, I certify that I am the owner, or am acting as the Owner's authorized agent, and that the application and documents contained with this submittal are complete and accurate to the best of my knowledge and abilities. Further, I understand if circumstances change, and my home occupation no longer qualifies for the exemption, I will immediately notify the Community & Economic Development Department and will apply for the appropriate permits that may be necessary.

Signature of Owner/Agent Date

Community & Economic Development Department
P.O. Box 809 / 910 Cleveland Ave. – Mount Vernon, WA 98273
(360) 336-6214 – www.mountvernonwa.gov