

HOME USE OCCUPATION APPLICATION PROCESS

PROPERTY OWNER MUST COMPLETE ENTIRE APPLICATION (If incomplete, it will be returned)

This form is completed by the City of Silver Bay and is only used as a guideline.

NAME OF APPLICANT: _____

PROPERTY LOCATION: _____

PERMIT NUMBER: _____

DATE COMPLETED

- | | | |
|--------------------------|---|-------|
| <input type="checkbox"/> | CITY RECEIVED A HOME-USE OCCUPATION RENEWAL APPLICATION
If existing permit expired, applicant will be considered new and required to go through full process with all fees applicable. | _____ |
| <input type="checkbox"/> | CITY RECEIVED \$30 RENEWAL APPLICATION FEE | _____ |
| <input type="checkbox"/> | CITY RECEIVED A HOME-USE OCCUPATION PRE-APPLICATION (FOR NEW APPLICATIONS) | _____ |
| <input type="checkbox"/> | CITY DETERMINED A PERMIT IS REQUIRED (FOR NEW APPLICATIONS) | _____ |

- | | | |
|--------------------------|---|-----------------------|
| <input type="checkbox"/> | CITY RECEIVED FULLY COMPLETED PERMIT APPLICATION
If incomplete, application will be returned | _____ |
| <input type="checkbox"/> | \$100 APPLICATION FEE PAID TO CITY OF SILVER BAY (FOR NEW APPLICATION) | _____ |
| <input type="checkbox"/> | COPY OF PROPERTY OWNERSHIP RECEIVED WITH APPLICATION (I.E. - the recorded deed) | _____ |
| <input type="checkbox"/> | DEADLINE DATE TO ISSUE PERMIT (60 days after city receives application) | _____ |
| <input type="checkbox"/> | APPLICATION SENT TO PLANNING/ZONING TO SET PUBLIC HEARING | _____ |
| <input type="checkbox"/> | PUBLIC HEARING DATE SET BY PLANNING AND ZONING BOARD | _____ |
| <input type="checkbox"/> | AFFIDAVIT OF MAILING TO LOCAL CITIZENS
<small>This includes a copy of the notice sent to property owners & a list of parties the notices were sent to. Notices sent to property owners within 250' for all hearings with the exception of rezoning in which notices will be sent to property owners within 500' of the property in this application. This must be done within 10 days before the public hearing but not more than 20 days.</small> | _____ |
| <input type="checkbox"/> | AFFIDAVIT OF PUBLIC HEARING PUBLICATION
<small>This must be completed 10 days before the public hearing but not more than 20 days.</small> | _____ |
| <input type="checkbox"/> | PUBLIC HEARING CONDUCTED | _____ |
| <input type="checkbox"/> | PLANNING & ZONING APPROVAL/DENIAL DATE
<small>Planning and Zoning Chair must sign application</small> | _____ APPROVED DENIED |
| | REASON FOR DENIAL: _____ | |
| <input type="checkbox"/> | COUNCIL APPROVAL DATE
<small>Mayor must sign application</small> | _____ APPROVED DENIED |
| | REASON FOR DENIAL: _____ | |
| <input type="checkbox"/> | DATE PERMIT ISSUED | _____ |
| | PROCESS COMPLETED | _____ |