



Zoning Permit for Home Occupation Amherst County, Virginia

Section A *(Please print in blue or black ink)*

Permit No: _____

| | | | |
|---|--------------|-----------------|-----------------|
| _____ | | | |
| Last <i>(Name of Applicant)</i> | First | MI | |
| _____ | | | |
| Mailing Address | City | State | Zip Code |
| _____ | | | |
| Property Address | City | State | Zip Code |
| _____ | | | |
| Telephone Number (s) | Home | Business | |
| _____ | | | |
| Last <i>(Name of Property Owner, if different)</i> | First | MI | |
| _____ | | | |

Is the lot recorded? Yes ☐ No ☐

If yes, complete section B

Section B *(Please fill out as completely as possible)*

| | |
|----------------------------------|---|
| Occupation within Dwelling _____ | Occupation within Accessory Structure _____ |
| Tax Map # _____ | |
| Deed Book/Page No. _____ | |

Directions to project site (from Amherst County Administration Building):

Section C *(Please fill in the blanks where applicable)*

Type of building: _____

Total floor area of dwelling: _____ sq. ft.

Total floor area of accessory structure: _____ sq. ft.

Proposed floor area of home occupation: _____ sq. ft.

Current use: _____ Proposed use: _____

Provide details about type of business, machinery and equipment involved, hours of operation, no. of employees, name of business, etc. Attach separate sheet, if necessary: _____

All applicants must read and agree to the following sections of the Amherst County Code:

For home occupations in Residential Districts, per Section 703.02(3): Home occupations, so long as the following criteria are met, are permitted: no outside storage, no signage, no employees or customers may come to the property, no increase in neighborhood traffic or change in type of traffic may occur.

For ALL home occupations, per Section 905:

General requirements:

1. The applicant must be the owner of the property on which the home occupation is to be located or must have written approval of the owner of the property if the applicant is a tenant.
2. The home occupation shall be operated only by the members of the family residing on the premises and no article or service shall be sold nor offered for sale except as may be made by members of the immediate family residing on the premises.
3. The home occupation shall not generate excessive traffic nor produce obnoxious odors, glare, noise, vibration, electrical disturbance, radio activity or other conditions detrimental to the character of the surrounding area.
4. Restriction on home occupations shall not apply to the sale of unprocessed agricultural and husbandry products.

Special requirements:

1. The home occupation within the main building shall not occupy more than twenty-five (25) percent, or five hundred (500) square feet, whichever is smaller, of the floor area within the main building.
2. The home occupation located in an accessory building to the main dwelling shall be no larger than one-third ($1/3$) area size of the main dwelling, shall be located in the rear yard, and shall meet the requirements in Section 901 herein.

905.04. Expiration. A zoning permit for home occupations shall expire under the following conditions:

1. Whenever the applicant ceases to occupy the premises for which the home occupation was issued, and no subsequent occupant of such premises shall engage in any home occupation until he shall have been issued a new permit after proper application.
2. Whenever the holder of such a permit fails to exercise the same for any period of twelve (12) consecutive months.

I hereby certify that the foregoing information and attachments are true and accurate to the best of my knowledge and agree to the above requirements for my home occupation.

Applicant's Signature

Date

DO NOT WRITE IN THIS SPACE - OFFICE USE ONLY

ZONING DISTRICT _____

| | | | |
|-------------|--------------------|-----|----|
| CONFORMING: | LOT(S) | YES | NO |
| | EXISTING BUILDING: | YES | NO |
| | EXISTING USE: | YES | NO |
| | PROPOSED USE: | YES | NO |

Is proposed project located within the WS District? _____ Does the project require a LDA permit? _____

Is the owner the applicant? _____ Is an owner permission letter attached? _____

COMMENTS _____

APPROVED/DENIED BY ZONING ADMINISTRATOR*

SIGNATURE

Amherst County Planning and Zoning Office

P.O. Box 390, Amherst VA 24521

DATE

Tele: 434.946.9303

*Any zoning permit shall automatically expire twelve (12) months from the date of issuance of the persons, firm, or corporation to which the permit was issued has not clearly demonstrated that the permit is being exercised for the purpose for which it was issued, or if so authorized is discontinued or suspended for a period of twelve (12) months.