



**MONTGOMERY TOWNSHIP
DEPARTMENT OF PLANNING AND ZONING**

1001 STUMP ROAD, MONTGOMERYVILLE, PA 18936-9605

Telephone: 215-393-6920 · Fax: 215-855-1498

www.montgomerytp.org

Permit # _____

Home Occupation PERMIT APPLICATION

Address of Property _____

Name _____ Phone # _____

Business Name _____

Description of Business / Use: _____

Signature _____

*We hereby agree to abide by all the provisions and conditions of the Montgomery Township Zoning Ordinance of 1952, as amended.

Approvals:

Final Inspection _____ Date _____
Inspected by

Zoning Officer Date _____

Please answer the following questions regarding your proposed home occupation:

1. Square foot of first floor of home (excluding garage) and unfinished basement _____

Square foot of space used for business (may not exceed 25% of sq ft listed above) _____

2. Other than residential, will your home be used for office use only? Yes No

If no, describe intended uses: _____

3. Will customers/clients come to your home? Yes No

If yes, describe expected number of customers / clients and frequency.

4. What is the anticipated volume of products to be produced in the home? _____

5. Where will your products be sold?

Off-site? Yes No Internet? Yes No Other: _____

6. Will you have employees (non-resident) in the home? Yes No

If yes, how many? _____

7. Will there be deliveries to and from the home? Yes No

If yes, describe frequency, volume, and carrier to be used: _____

8. Do you intend to store supplies and/or materials on the premises? Yes No

If yes, please describe supplies, quantity and location to be stored: _____

9. Any hazardous materials? Yes No If yes, please describe: _____

10. List and describe the equipment to be used for the business: _____

11. Number, size and type of vehicle(s) used in this business: _____

If any of these answers change in the future you must notify the Township immediately.