



400 N Mill St
PO Box 229
Colfax, WA 99111
(509) 397-3861

Home Occupation Permit

CMC 5.06.010 - Purpose.

This chapter is established to provide a means whereby the conduct of business may be permitted as a use accessory to an established residence within a residential district. The purpose is to create an administrative framework to authorize such uses that do not pose a disruption to or conflict with the existing and planned residential environment.

Application Procedure

1. Client will submit a request for a Home Occupation Permit. Include detailed description of the Occupation use requested as stated under CMC 5.06.
2. The Home Occupation needs to fall within the parameters set out in the City's zoning code CMC 5.06.
3. If they fall outside these parameters, the applicant could fill out a Conditional Use Permit and follow the CUP procedures.

Submittal Requirements

A complete application is required before the City of Colfax can proceed with technical analysis and make an informed decision on the Home Occupation permit. Below is a list of materials that are required for completed applications. The City of Colfax will not process any application until all the items on the list have been submitted. Please consult with the Building & Community Development Associate if you have any questions. All application materials become public information.

Required Materials from Applicant

1. Occupation Application;
2. Kinds and amounts of supplies, materials and equipment to be used and the locations where they will be stored or used upon the premises;
3. Description of all activities involved in the business and how the business will operate;
4. Appropriate application fee as stated in current fee schedule;
5. A list (names and addresses) of the abutting/adjoining property owners.



Application for Home Occupation Permit

400 N Mill St
PO Box 229
Colfax, WA 99111
(509) 397-3861

APPLICANT INFORMATION

YOUR NAME(Please write above this line)			PHONE#
BUSINESS NAME(If Applicable)		FAX#	
MAILING ADDRESS			
CITY	WA	ZIP	
E-MAIL ADDRESS			
SIGNATURE (ORIGINAL REQUIRED)		DATE	
Note: I consent to an on-site inspection by an employee(s) of the City of Colfax <input type="checkbox"/>			

Property

Address/location _____

Current Zone: _____ Size: _____ (acres or square feet)

*Attach a plat map or drawing on following pages

Land Use

Existing use of the property:

Intended use of property:

Changes to be made to the property:

Special information (deed restrictions, etc.) the City should know:

HOME OCCUPATION INFORMATION

Please describe the nature of the business:

Approximately how many patrons, clients or customers will be entering / exiting the business on a daily basis:

Please list any possible noise or nuisance concerns that could affect surrounding properties:

Please explain the parking options available: (parking code limits to 2 vehicles per residence for on street parking)

Show how the proposed use will not have an adverse effect on adjacent property:

PLAT MAP / DRAWING OF PROPERTY / LOT

PROPERTY ADDRESS _____

*Please attach maps of the property. Please indicate and label dimensions of property/structures, setbacks, and easements. You may also include photos of the property.

Signature(s)

I (We) certify that all of the above statements and statements on any documents or drawings submitted herewith are true to the best of my (our) knowledge and belief.

Name of Applicant

Signature of Applicant and Date
