

**CITY OF SOMERSWORTH
APPLICATION FOR RENEWAL
HOME OCCUPATION PERMIT**

Fee Paid: _____
Case Number: _____
Date Received: _____

IMPORTANT: Please type or print legibly.

1) LOCATION OF PROPERTY: _____

2) NAME OF LAND OWNER: _____ TELEPHONE: _____

ADDRESS: _____

3) NAME OF APPLICANT (IF DIFFERENT THAN OWNER) : _____
TELEPHONE: _____

4) TAX MAP NUMBER: _____ LOT NUMBER: _____

5) ZONING DISTRICT(S): _____

6) TYPE OF BUSINESS: _____

I/We hereby apply for a renewal of a home occupation permit. If I/We propose any alteration or expansion that changes the scope of the permit, I/We shall apply to the Zoning Board of Adjustment for approval of said change to the permit. If the application for renewal of the home occupation is approved, I/We will comply with all of the ordinances of the City of Somersworth, as well as any stipulations of the Zoning Board of Adjustment, in the operation of the approved use. I/We agree to allow the Code Enforcement Officer to inspect the subject-property upon demand, and to ensure compliance with all requirements. I/We understand that if violation of any of the criteria and conditions for a home occupation, as outlined in the Zoning Ordinances or as per any condition of the original approval occurs, the permit for the home occupation is subject to revocation.

SIGNATURE OF PROPERTY OWNER(S): _____

SIGNATURE OF APPLICANT(S): _____
