



Planning & Building

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HOME OCCUPATION APPLICATION

ALL SECTIONS ARE REQUIRED TO BE FILLED OUT. A PRE-APPLICATION MEETING MAY BE REQUIRED WITH THE PLANNING DEPARTMENT.

1. APPLICANT INFORMATION

FULL NAME _____
FIRST LAST M.I.

ADDRESS OF BUSINESS _____
STREET ADDRESS APT/UNIT #

_____ CITY STATE ZIP CODE

HOME PHONE _____

NAME OF BUSINESS _____

EMAIL ADDRESS _____

2. ABOUT THE BUSINESS

THE HOME OCCUPATION SHALL BE CLEARLY INCIDENTAL AND SECONDARY TO THE USE OF THE DWELLING FOR DWELLING PURPOSES AND MUST NOT CHANGE THE RESIDENTIAL CHARACTER THEREOF. THE FOLLOWING USES SHALL NOT BE PERMITTED AS HOME OCCUPATIONS: MOTOR VEHICLE, BOAT OR TRAILER REPAIR, OR SERVICE; MACHINE OR WELDING SHOPS; SEXUALLY ORIENTED BUSINESSES; OR ANY BUSINESSES THAT ATTRACT MORE THAN TWO (2) CLIENTS OR CUSTOMERS AT ANY ONE (1) TIME. (ORD. 2006-869 PT. 1)

1. WHAT TYPE OF BUSINESS WILL YOU BE OPERATING OUT OF YOUR HOME? DESCRIBE IN DETAIL WHAT FUNCTIONS OF THE BUSINESS WILL BE CONDUCTED IN THE HOME, INCLUDING WHAT PRODUCTS WILL BE RETAILED.
2. ARE YOU CURRENTLY OPERATING THIS BUSINESS OUT OF YOUR HOME? IF SO, PLEASE INDICATE ORIGINAL START DATE.
3. IF YOU ARE NOT CORRENTLY OPERATING THE BUSINESS OUT OF YOUR HOME, WHEN IS THE ANTICIPATED START-UP DATE?

4. WHAT WILL THE HOURS OF OPERATION BE FOR THE BUSINESS?

5. HOME OCCUPATIONS MAY NOT GENERATE MORE THAN TEN (10) BUSINESS-RELATED VEHICLE TRIPS PER DAY. WILL CLIENTS OR CUSTOMERS COME TO YOUR HOME? IF SO, PLEASE INDICATE HOW MANY CUSTOMERS YOU ANTICIPATE COMING TO YOUR HOME PER DAY?

6. OTHER THAN RESIDENTS OF THE DWELLING CONTAINING THE HOME OCCUPATION, THERE SHALL BE NO MORE THAN ONE (1) ADDITIONAL EMPLOYEE WORKING AT THE SITE OF THE HOME OCCUPATION, INCLUDING YOURSELF. HOW MANY EMPLOYEES WILL BE AT THE SITE?

7. PLEASE DESCRIBE WHERE EMPLOYEES AND/OR CUSTOMERS WILL BE PARKING.

8. WILL YOU RECEIVE DELIVERIES AT YOUR HOME? IF SO, HOW MANY DELIVERIES DO YOU EXPECT PER WEEK? WILL LARGE TRUCKS BE DELIVERING ITEMS TO YOUR HOME?

9. THERE SHALL BE NO EXTERIOR STORAGE ON THE PREMISES OF MATERIAL, MERCHANDISE, OR EQUIPMENT USED AS PART OF THE HOME OCCUPATION. WILL YOU BE STORING ANY MATERIAL AND/OR MERCHANDISE ON SITE? IF SO, PLEASE STATE WHERE MATERIAL AND/OR MERCHANDISE WILL BE STORED.

10. WILL YOU BE PLACING ANY SIGNAGE ON THE DWELLING AND/OR ACCESSORY BUILDING? (THERE SHALL BE NO CHANGE IN THE OUTSIDE APPEARANCE OF THE DWELLING OR OF THE PREMISES OR OTHER VISIBLE EVIDENCE OF THE CONDUCT OF SUCH HOME OCCUPATION, EXCEPT FOR A LIMITED AMOUNT OF SIGNAGE ALLOWED BY THE MUNICIPAL CODE. ANY SIGNAGE WILL REQUIRE A BUILDING PERMIT AND APPROVAL FROM THE HOME OWNER ASSOCIATION (HOA), IF APPLICABLE.)

11. WILL THERE BE ANY NUISANCES ASSOCIATED WITH YOUR BUSINESS? NO EQUIPMENT OR PROCESS SHALL BE USED IN SUCH HOME OCCUPATION WHICH CREATES ANY GLARE, FUMES, ODORS, NOISE, OR OTHER OBJECTIONABLE CONDITIONS DETECTABLE TO THE NORMAL SENSES AT THE PROPERTY LINE, IF CONDUCTED IN A SINGLE-FAMILY DWELLING, OR OUTSIDE OF THE DWELLING UNIT, IF CONDUCTED IN A MULTI-FAMILY DWELLING.

4. DEFINITION AND CODE

Home occupation means a business conducted within a residence and meeting the standards of the Fort Lupton Municipal Code.

Sec. 16-65. Home occupations.

(a) Intent. It is the intent of the City to permit commercial activities to be conducted within dwellings in specified zoning districts and on a limited basis when the nature of the activities does not attract large numbers of customers or clients and is not evident or detrimental to the peace, enjoyment and quality of life in the surrounding neighborhood.

(b) Standards for home occupations. Home occupations must meet the following standards:

- (1) Other than residents of the dwelling containing the home occupation, there shall be no more than one (1) additional full- or part-time employee working at the site of the home occupation.
- (2) The employee and clients may park in off-street parking spaces on the site of the home occupation or in on-street spaces adjoining the site of the home occupation.
- (3) Space used by the home occupation shall not exceed five hundred (500) square feet or thirty percent (30%) of the total floor area of the dwelling, whichever is less. The home occupation shall be conducted entirely within the dwelling or designated accessory buildings.
- (4) The home occupation shall be clearly incidental and secondary to the use of the dwelling for dwelling purposes and must not change the residential character thereof.
- (5) There shall be no change in the outside appearance of the dwelling or of the premises or other visible evidence of the conduct of such home occupation, except for a limited amount of signage as specified in this Chapter.
- (6) There shall be no exterior storage on the premises of material, merchandise or equipment used as a part of the home occupation.
- (7) No equipment or process shall be used in such home occupation which creates any glare, fumes, odors, noise or other objectionable conditions detectable to the normal senses at the property line, if conducted in a single-family dwelling, or outside of the dwelling unit, if conducted in a multi-family dwelling.
- (8) Home occupations may not generate more than ten (10) business-related vehicle trips per day.
- (9) The following uses shall not be permitted as home occupations: motor vehicle, boat or trailer repair or service; machine or welding shops; sexually oriented businesses; or any other businesses that attract more than two (2) clients or customers at any one (1) time. (Ord. 2006-869 Pt. 1)

5. CERTIFICATE & SIGNATURE

I certify that I am the owner of the property listed on this application. I agree to comply with all conditions and requirements of Section 16-65 of the Fort Lupton Municipal Code. I have read and understand the Home Occupation code requirements and understand that if I do not comply with these conditions and requirements that my Home Occupation permit can be revoked by a designated Fort Lupton city official without prior warning and a code citation may be issued.

PRINT NAME _____

SIGNATURE _____ DATE _____

6. FOR OFFICE USE ONLY		
ASSESSOR'S PARCEL NUMBER:	ZONING DESIGNATION:	APPLICATION EXPIRATION: <input type="checkbox"/> N/A
COMMENTS FROM FIRE DISTRICT: <input type="checkbox"/> N/A		DATE RECEIVED:
COMMENTS FROM POLICE: <input type="checkbox"/> N/A		DATE RECEIVED:
COMMENTS		
APPLICATION APPROVED		
<input type="checkbox"/> YES	<input type="checkbox"/> NO	
REASON FOR DENIAL:		
PLANNING OFFICIAL:		DATE: