



## Forsyth County Department of Planning & Community Development

110 E. Main Street, Suite 100 | Cumming, Georgia 30040 | (770) 781-2115 | forsythco.com

*FOR STAFF USE ONLY*  
**DATE STAMP**

### Contact Information

#### A. APPLICANT CONTACT INFORMATION

Name:

Mailing Address:

Phone#:

E-mail Address:

#### B. REPRESENTATION INFORMATION

Name:

Address:

Phone#:

E-mail Address:



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### Home Occupation Permit (HOP) Application

This form is required for home occupation permit (HOP) applications. While this application provides some information regarding the necessary requirements to submit a complete application, the full application requirements can be found at [forsythco.com](http://forsythco.com). From the main web page, select Department and Offices, then Planning & Community Development. Scroll down and select Zoning Division, then select Zoning and Other Public Hearing Application Information and scroll down to Application Guide and then select Home Occupation Permit.

#### A. APPLICANT INFORMATION

Name:

Address:

Phone #:

E-mail Address:

#### B. REPRESENTATION INFORMATION (IF APPLICABLE)

Preferred Contact: ☐ Attorney ☐ Authorized Agent

Name:

Address:

Phone #:

E-mail Address:

#### C. PROPERTY INFORMATION

Tax Map & Parcel #(s): (e.g. xxx-xxx)

Current Zoning:

Proposed Use:

Property Acreage:

Proposed Road Access:

Does the subject property lie partly within or adjacent to the City of Cumming? Yes ☐ No ☐

#### D. REQUIRED BUSINESS OR OCCUPATIONAL LICENSES

Required business and/or occupational licenses must be obtained or applied for at the time of the HOP submittal. Please specify below the license number(s). Please provide copies of all applicable federal, state, or local licenses with your HOP application. Otherwise, provide documentation verifying that all license applications have been submitted for approval.

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Application #

## E. HOME OCCUPATION PROJECT DESCRIPTION

Please provide a written answer to each question below.

1) Provide a detailed description of the Home Occupation including the location and nature of the business:

2) Will the activities associated with the Home Occupation be conducted within the residence and/or in an existing enclosed accessory structure? Please indicate the total floor area of the domicile and/or accessory building. Also indicate the total floor area that will be used to conduct activities associated with the professional home office. These totals should exclude unheated areas such as porches, unfinished basements, garages and decks.

3) Will there be alterations (e.g. structural, cosmetic, etc.) to the exterior or interior appearance of the structures associated with this home occupation? If so, please describe in detail.

4) How many part- or full-time non-resident employees will be working on the premises?

5) Please indicate with a check mark if the activities associated with this home occupation will generate any of the following:

- |  |  |
|--|--|
| <input type="checkbox"/> Solid or liquid waste     | <input type="checkbox"/> Water consumption   |
| <input type="checkbox"/> Noise vibrations or smoke | <input type="checkbox"/> Dust or odor  |
| <input type="checkbox"/> Heat or glare             | <input type="checkbox"/> Disturbance or interference with the provision of electrical, television, or other utility services |
| <input type="checkbox"/> Traffic                   | <input type="checkbox"/> Light spillage unto adjacent property   |
- ☐ Create any safety hazards exceeding those which are typically and customarily produced by and / or associated with a residential dwelling and residential uses in the zoning district and surrounding neighborhood within which the subject property and home occupation is located.

6) If any of the above-referenced boxes are checked, please specifically elaborate in the space provided below.

## HOME OCCUPATION PROJECT DESCRIPTION - CONTINUED

- 7) Will the total area used to conduct activities associated with the home occupation exceed 33% of the total finished space of the residential dwelling, exclusive of unheated areas such as porches, unfinished basements, garages and decks?
- 8) Type of equipment and quantity used in connection with the home occupation (required)
- 9) Will there be any wholesale or retail sales conducted from this property on a regular or year-round basis or as a primary activity or function of the home occupation excluding sales conducted entirely via mail, telephone, or internet? If so, please describe in detail.
- 10) Will goods, equipment, supplies, materials or products intended for sale or associated with the home occupation be displayed outside the dwelling, accessory structure, or elsewhere on the property? If so, what and where? (Note: This provision is not intended to limit or prohibit the sale of agricultural products grown from the same agricultural property).
- 11) Will there be any vehicles used in connection with the home occupation? If so, how many? Will there be any truck deliveries or pick-up of supplies or products associated with the home occupation? What types of vehicles will be used and what will the pick-up and delivery hours be?
- 12) Where will parking areas be located? (Note: All parking areas shall be located in an off-street location on a paved, gravel or other suitable parking surface. Parking on lawn areas is prohibited).
- 13) Will there be an exterior sign? If so, what are the proposed dimensions of the sign and where will it be posted? (Note only one (1) sign not greater than two (2) sq. ft. in area mounted flush to the dwelling is allowed).

**F. PROPERTY OWNER AUTHORIZATION: ADD ADDITIONAL SHEETS IF APPLICABLE**

This application must be signed by the owner(s) as listed on the deed of record for the subject property. If there is more than one property owner, additional affidavits can be found on the website at [forsythco.com](http://forsythco.com). Only the owner or authorized agent (i.e. applicant or representing attorney) may speak on behalf of this application at the public hearing.

The undersigned hereby swear that he/she/they is/are the owner(s) of the subject property as identified on this application.

I /We hereby authorize the authorized agent or attorney listed on the front of this application to speak and act on behalf of the owner(s) in pursuit of the home occupation application on this property. I/We realize that any action granted for this property will be binding on the property regardless of ownership.

Owner Name #1:

Address:

Phone #:  E-mail Address:

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Notary: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Name #2:

Address:

Phone #:  E-mail Address:

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Notary: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Name #3:

Address:

Phone #:  E-mail Address:

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Notary: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Name #4:

Address:

Phone #:  E-mail Address:

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Notary: \_\_\_\_\_ Date: \_\_\_\_\_

**G. CORPORATE/COMPANY DISCLOSURE: ADD ADDITIONAL SHEETS IF APPLICABLE**

If either the applicant or owner are corporations, provide the names of the corporate stockholders with 10% interest or greater; officers; and directors unless the corporation has stock that is traded on a national stock exchange in which case the corporate name shall be sufficient. If either the applicant or owner are limited liability companies, provide the names of all officers/managers or members. Also, identify any parties having a direct financial interest in the zoning application other than the owner and applicant (e.g. developer or anticipated commercial occupant). If such additional parties having a direct financial interest are corporations or companies, then provide the names of officers, directors, company members, stockholders with 10% ownership or greater, unless the corporation has stock that is traded on a national stock exchange in which case the corporate name shall be sufficient.

In the event that public disclosure of the developer or commercial occupant may cause such developer or occupant to withdraw from pursuing a project due to competition, trade secret, or proprietary business concerns, and if the proposed development advances a bona fide economic development purpose, then an affidavit affirmatively declaring such shall be tendered with the application and in that event only the owner and or authorized applicant shall be identified. The affidavit contemplated in this paragraph shall only be valid for its intended purpose if it is also signed by a duly authorized representative of the Forsyth County Development Authority, Cumming/Forsyth County Chamber of Commerce, or the Forsyth County Manager, with such signature certifying that the pertinent individual is aware of the proposed development and confirms that the proposed development advances a bona fide economic development purpose. For purposes of this paragraph, a bona fide economic development purpose means a development that would be eligible for an inducement under section 22-260 of the Forsyth County Economic Development Ordinance.

If there is more than one corporate entity, additional disclosures can be found on the website at [forsythco.com](http://forsythco.com).  
I am a duly authorized officer/member of the \_\_\_\_\_ [corporate entity]. The \_\_\_\_\_ [corporate entity] is the applicant or owner of the property seeking rezoning, conditional use and/or sketch plat approval and I am fully vested with authority to act on behalf of the \_\_\_\_\_ [corporate entity] in submitting this application. In making this representation, I acknowledge that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in any matter within the jurisdiction of any department or agency of state government or of the government of any county, city, or other political subdivision of this state, shall upon conviction thereof, be punished by a fine of not more than \$1,000.00 or by imprisonment for not less than one nor more than five years, or both.

Name of Corporate Entity:

Name of Officer(s), Director(s) and/or Stockholder(s)


**H. APPLICANT CERTIFICATION (HOME OCCUPATION PERMIT): PLEASE READ AND INITIAL THE FOLLOWING 10 STATEMENTS**

- \_\_\_\_\_ 1) I have read and understand the requirements as set forth in the Unified Development Code (UDC), Chapter 16, Article III, Home Based Businesses.
- \_\_\_\_\_ 2) I affirm that I am the owner/proprietor of the home business and will be operating the business from my principal domicile or permanent home.
- \_\_\_\_\_ 3) I understand that it is my responsibility to notify the Planning and Community Development Director of any changes in conduct of the home occupation that are different from that included in the description above. Such changes may result in the need for a new application.
- \_\_\_\_\_ 4) I understand that I am responsible for maintaining a valid Forsyth County business license and that failure to hold a valid business license will invalidate the home occupation permit.
- \_\_\_\_\_ 5) I understand that approval of this home occupation permit is valid for an initial twelve (12) months unless otherwise specified as a condition of approval by the Planning Commission. After the initial twelve (12) month period, all home occupation permits expire on the 1st day of April.
- \_\_\_\_\_ 6) I understand that the Planning and Community Development Director may revoke a home occupation permit if any of the following circumstances occur:
- (a) Changes occur in the activities or character of the home occupation being conducted that warrant additional review and approval by the Planning and Community Development Director or Planning Commission;
  - (b) Whenever the Planning and Community Development Director has reasonable cause to believe that any of the general or specific requirements and/or performance criteria set forth in the Code, or conditions imposed as part of the home occupation permit is being or have been violated, or any activity associated with the conduct of the home occupation becomes hazardous, harmful, noxious, offensive or a nuisance to the surrounding neighborhood and properties.
- \_\_\_\_\_ 7) I understand that if the Planning and Community Development Director does revoke this home occupation, the Director's decision may be appealed to the Zoning Board of Appeals.
- \_\_\_\_\_ 8) I understand that the granting of a home occupation permit shall not constitute a covenant running with the property from which such home occupation is being conducted. A home occupation permit shall not be transferable to another property and shall automatically and immediately terminate and become null and void upon the sale, lease, or transfer of said property to a party different than to whom the home occupation permit was originally granted.
- \_\_\_\_\_ 9) I understand that failure to comply with the provisions of the Unified Development Code (UDC), Chapter 16, Article III, Home Businesses, including failure to obtain a home occupation permit to operate my home based business, shall constitute a misdemeanor and is punishable as provided by the provisions of OCGA Section 36-1-20.
- \_\_\_\_\_ 10) Please list the name(s) and dollar amount of any campaign contribution or gift (for gifts greater than \$100) made to any Forsyth County elected official during the two years immediately preceding the filing of this application. If the applicant is a business, then such disclosure shall pertain to contributions made on behalf of the business as well as on behalf of the individual representing the business for purposes of this application submittal.

Please indicate the name of the elected official, date of gift, and dollar amount of any gift or contribution:

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The undersigned has personally appeared before me, a Notary Public, and states upon oath and by initialling, that he/she has read, understands, and agrees to comply with each of the above ten (10) applicant certifications.

Printed Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Notary: \_\_\_\_\_ Date: \_\_\_\_\_

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**I. SIGN ORDINANCE ACKNOWLEDGEMENT**

By signing below, applicant acknowledges and affirms that prior to submission of this application for home occupation permit, applicant has read and reviewed the County regulations applying to such application, including the Forsyth County Sign Ordinance, and agrees to comply with the provisions of the Code.

Name:

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

**J. APPLICANT WITHDRAWAL (ONLY SIGN IF OFFICIALLY WITHDRAWING APPLICATION REQUEST)**

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_