

**CITY OF JENNINGS**

**HOME BASED BUSINESS APPLICATION**

In accordance with Chapter 38, City of Jennings Zoning Ordinance, Article 3, Definitions, following is the definition for a Home Based Business. All applications will be reviewed for compliance with the definition.

**HOME BASED BUSINESS:** Any commercial activity conducted in a residential dwelling. The regulations governing home based businesses are as follows:

1. The home based business shall not employ on the premises persons not residing in the home as shown on the Certificate of Occupancy.
2. Signage shall consist of only (1) non-illuminated nameplate attached to the building. Such sign shall be no more than one (1) square foot in area.
3. No mechanical equipment shall be installed except that which has a normal domestic function.
4. No commodity shall be sold from the premises.
5. No more than twenty-five (25) percent of the floor area of any story shall be used for the home bases business.
6. No use requiring a Conditional Use permit, or other special permit, in any district shall be utilized as a home based business.
7. Only one home business shall be permitted per dwelling.
8. Permission granted by this definition shall not be construed as an exemption from any local, state, federal regulation or licensing requirements pertinent to the activity pursued.

**IN ADDITION TO THE HOME BASES BUSINESS CERTIFICATE OF OCCUPANCY, A BUSINESS LICENSE MUST BE OBTAINED.**

Name \_\_\_\_\_ of \_\_\_\_\_ Business  
Owner \_\_\_\_\_

Address \_\_\_\_\_ Phone  
No. \_\_\_\_\_

Name of Proposed Business \_\_\_\_\_

Type of Business \_\_\_\_\_

**SPECIFIC USE OF PREMISES** (in detail) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Property Owner \_\_\_\_\_

Address \_\_\_\_\_ Phone

No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip

Code \_\_\_\_\_

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

**(Office Use Only)**

Zoning District \_\_\_\_\_

Approved  
Use \_\_\_\_\_

Approved  
By \_\_\_\_\_

**FEE: \$50.00** Received By \_\_\_\_\_ Permit No. \_\_\_\_\_ Date Issued \_\_\_\_\_