



**TOWN OF BEDFORD LAND DEVELOPMENT REGULATIONS HOME OCCUPATION AGREEMENT**

903. HOME OCCUPATIONS

PERMIT FEE \$25.00

903.01 SPECIAL REQUIREMENTS Home occupations, where permitted, must meet the following special requirements:

- a. The applicant must be the owner of the property on which the home occupation is to be located, or must have written approval of the owner of the property.
- b. The occupation shall be operated by the members of the family residing on the premises and no article or service shall be sold or offered for sale except by members of the immediate family residing on the premises.
- c. The processing, servicing and storage involved in the home occupation shall be totally within the main building and shall not occupy more than twenty-five (25) percent of the floor area within said building.
- d. The home occupation shall not generate excessive traffic or produce obnoxious odors, glare, noise, vibration, electrical disturbance, radioactivity or other conditions detrimental to the character of the surrounding area.
- e. The building in which the home occupation is to be located must be an existing structure ready for occupancy and not a proposed structure.
- f. The presence of the home occupation shall not change the outside appearance of the dwelling, nor increase the parking area for the dwelling, nor shall any sign for the home occupation be permitted.

903.02 EXPIRATION A permit for home occupation shall expire under the following conditions:

- a. Whenever the applicant ceases to occupy the premises for which the home occupation was issued. No subsequent occupation such premises shall engage in any home occupation until they have been issued a new permit after proper application.
- b. Whenever the holder of such permit fails to exercise the same for any period of six (6) consecutive months.

I agree as applicant that my business will comply with the preceding requirements and regulations for my home occupation.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
PHONE #

\_\_\_\_\_  
E-MAIL ADDRESS

\_\_\_\_\_  
BUSINESS NAME

\_\_\_\_\_  
BUSINESS TYPE / DESCRIPTION

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

\_\_\_\_\_  
Tax Map Number

\_\_\_\_\_  
Business License Issued

\_\_\_\_\_  
Owner's Authority Required / Received

\_\_\_\_\_  
APPROVAL  
ZONING ADMINISTRATOR, TOWN OF BEDFORD, VA

\_\_\_\_\_  
DATE