



5200 Springfield Street, Suite 100
Riverside, OH 45431

Phone: 937-233-1801 Fax: 937-237-5965 www.riversideoh.gov

Home Occupation Certificate of Zoning Compliance Application

PROJECT ADDRESS: _____ Zoning District: _____

Applicant _____

Owner _____

Applicant Address _____

Owner Address _____

City _____ State ____ Zip Code _____

City _____ State ____ Zip Code _____

Person to contact _____

Phone # _____

Phone # _____

Email _____

Email _____

Check if same as applicant information

Read the statements below and sign to acknowledge agreement.

I hereby acknowledge that in review of this application, the City of Riverside may require the services of the City Engineer and/or the City Attorney to insure that the requested item(s) for review of this application is compliant to the current zoning laws and policies of the City of Riverside. For any and all costs incurred in the review of this application, I acknowledge that the city of Riverside or any of the City's consultants listed above are my responsibility to reimburse.

I hereby attest that all information on this application is, to the best of my knowledge, true and accurate. Additionally, I hereby grant permission for the City of Riverside Zoning Administrator to enter upon the above mentioned property (or as described in the attachment) for the purposes of gathering information related to this application.

Owner Signature: _____ Date _____

Applicant Signature: _____ Date _____

Checklist:

- Completed Application
- Floor Plan (indicate portions of dwelling which will be used for Home Occupation)
- \$40 application fee (cash or check made payable to the City of Riverside)
- Home Occupation without a Permit Penalty: **Double Total Permit Fee**
- Completed Tax Registration form/Proof of Tax Account Number
 - Form will be submitted to the City of Riverside Finance Department
 - For more information contact the **City of Riverside Finance Department at 937-233-1801, option 3 or finance@riversideoh.gov**

OFFICIAL USE ONLY

Permit No. _____

Approved _____ Date _____

Intake Staff _____

Denied _____ Date _____

Date _____

Parcel ID _____

Project Information:

Type of home occupation (e.g. craftsman, admin. office): _____

Name of business: _____

Hours of operation (list days and hours): _____

Number of employees living on site (including yourself): _____

Number of employees not living on site: _____

Note: You are allowed one non-resident employee. See Section 1115.05 of Unified Development Code (UDO) for full regulations.

Number of Customers/Clients/Pupils on site at the same time: _____

Number of off-street parking spaces: _____

Number of on-street parking spaces: _____

Note: No traffic shall be generated by a home occupation in greater volumes than would normally be expected in a residential neighborhood, and any need for parking generated by a home occupation shall be met off the street. In conformance with all off street parking requirements provided within the UDO.

Total square footage of the residence: _____

Total square footage of the home occupation: _____

Note: Total area permitted for home occupation is 500 sq. ft. or 25% of finished square footage, whichever is less. A home occupation shall be carried on wholly within the dwelling unit. No home occupation or any storage of goods, materials, or products connected with a home occupation shall be permitted in any accessory building, detached garage or any vehicle including a recreational vehicle.

Sample Floor Plan

