



CITY OF CLIVE
 1900 NW 114th Street
 Clive, IA 50325-7077
 Phone (515)223-6221
 Fax (515) 457-3091
 www.cityofclive.com

**APPLICATION FOR
 HOME OCCUPATION PERMIT**

DATE ISSUED	EXPIRATION DATE
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APPLICANT INFORMATION

ADDRESS

RESIDENT NAME	PHONE
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NAME OF BUSINESS	BUSINESS PHONE
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PLAT	LOT #
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DESCRIPTION OF HOME OCCUPATION

DO YOU HAVE EMPLOYEES THAT WORK AT THIS LOCATION?

Applicant's Certification

I hereby certify that the above information is correct and agree to comply with all City Ordinances and State laws as it pertains to my business. I further agree to obtain all City, County, State and Federal permits, approvals and/or clearances including, but not limited to building and electrical permits. Further, I hereby certify that I have received a copy of the conditions for the operation of a home occupation. I understand that should I fail to comply with the agreed-upon conditions, my home occupation permit may be immediately revoked and that all other applicable penalties, including criminal prosecution, may be pursued.

In addition to the above, I understand that if my home occupation will be conducted in a rented residence, I am required to provide a letter signed by the owner stating approval of the proposed business.

 Signature

 Date

- Approved Approved with conditions (see below) Denied (see below)

 Planner or Authorized Representative

 Date

cc: Fire Department
 Police Department