

# HOME OCCUPATION/HOME BUSINESS QUESTIONNAIRE

**This Questionnaire should be submitted with your application for Development Approval for a Home Business or Home Occupation.**

Name of Business:	<hr/>		
Describe the nature of the business:	<hr/> <hr/> <hr/>		
Do you intend to employ people who do not live at the residential property:	<input type="checkbox"/> Yes    If yes, how many people do you intend to employ from the property:	<input type="checkbox"/> No    _____	
Describe the area within the house (or around the house) to be used for the business:	<hr/> <hr/> <p style="font-size: small; margin-top: 5px;"><i>Note: a floor plan of the dwelling must be submitted showing the area highlighted.</i></p>		
Will the operation of the proposed business generate any of the following (provide a description if yes):			
Noise:	<hr/>		
Odours or smoke:	<hr/>		
Waste:	<hr/>		
Storage or chemicals or flammable materials:	<hr/>		
Will retail sales be undertaken from the property:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will services (power, water) need to be upgraded to operate the business:	<input type="checkbox"/> Yes <input type="checkbox"/> No
If the business involves the production of goods, how will goods be delivered to place of sale:	<hr/> <hr/>		
How many cars are expected to visit the property each day:	<hr/> <hr/>	What is the highest number of cars expected to be present at the property at any one time:	<hr/> <hr/>
Proposed Hours & Days of Operation:	<hr/>		
Please describe any vehicles to be used for the operation of the business that cannot be driven with an A Class Licence: _____			
Signature of Applicant:	<hr/>	Date:	<hr/>