



Building Department

TOWN HALL • 525 WASHINGTON STREET • WELLESLEY, MA 02482-5992

PHONE: 781-431-1019 EXT.2228 FAX: 781-283-5724

Home Occupation Registration Form

RENEWABLE ANNUALLY January 1

Fee is \$25.00

Michael T. Grant
Inspector of Buildings
Zoning Enforcement Officer
Public Safety Officer

Date:

Home Occupation: A non-residential use of a dwelling unit, by the resident, or residents, for gainful employment, that is subordinate but compatible to residential use.

To: Inspector of Buildings/Zoning Enforcement Officer

This is to notify you that the person applying wishes to conduct a Home Occupation pursuant to Section **II.6** of the Town of Wellesley Zoning Bylaw.

1. Name of Applicant: (and home owner if different)

2. Street Address:
3. Business Name: (d/b/a)
4. Room Used:
5. To establish conformance with the bylaw, please answer **YES** or **NO** to the following:

(a) Clients/Customers will be coming to the home?	Yes	NO
(b) Any employees not residing on the premises?	Yes	NO
(c) Any pickup and delivery of products?	Yes	NO
(d) Will there be any signage?	Yes	NO
(e) Will there be any outdoor storage of equipment?	Yes	NO
(f) Will there be any change in the outside appearance?	Yes	NO
(g) Is any additional parking required?	Yes	NO

Detailed nature and type of home occupation:

I hereby acknowledge that I have read Section **II.6-HOME OCCUPATION**, of the Zoning Bylaw, and hereby attest that I shall conduct my Home Occupation in compliance with said bylaw. I understand that non-compliance with the by-law, and/or failures to renew my permit **ANNUALLY**, shall be cause for an immediate Cease and Desist order from the Zoning Enforcement Officer.

Signature of Applicant

Phone Number