

2401 Sheridan Boulevard Edgewater, Colorado 80214 www.edgewaterco.com

## MAJOR HOME OCCUPATION LICENSE APPLICATION

☐ New License			Licen	se Rene	ewal
Home occupation means any occupation conduct an accessory building associated with the resider Section 16-26-20(a)(1).					
Major home occupation means a home occurequirements of the definition of a minor home major home occupation within the City without	occupation. (\$53 Annua	l Fee). 1			
Minor home occupation means a home occupated on not reside within the dwelling; has no more purposes of the home occupation at any one (1) place of business for purposes of the home occupated and occasional deliveries to or from the (16) feet or rated over eight thousand (8,000) po	than one (1) vehicle sto time, and no more than ecupation in any twent ne place of business with	opping at eight (8 y-four-ho h any ve	the pla 3) vehiclour peri	ce of butes stopped tod; and	usiness for oing at the l has only
Applicant is defined as the Legal Name of Indivi	idual or Business Entity	that will	hold lie	cense if	approved.
Applicant is applying as (attach organizational d	locuments):				
☐ Corporation ☐ Limited Liability Company	☐ Individual ☐ Association or Other	r		tnership n-Profit	
Applicant Name:					
Trade Name of Establishment (doing business as	s):				
Applicant Contact Name (please print):					
Address of Premise Location:					
Street Address	City	State		Zip Co	ode
Business Mailing Address (if different from Pres	mise location):				
Street Address	City	State		Zip Co	ode
Business Phone:	_ Emergency Phone:				
Business Email Address:	Website Address: _				
If your license is approved, would you like your directory on the City's website at <a href="www.edgewat">www.edgewat</a>		be conta	ained in Yes	the bus	iness No
State Sales Tax License No.:	FEIN No.:				
Jefferson County Health Department License No	0.:	_			

Street Address		City	State	Zip C	Code
Social Security Num	nber * (last four digits only	r): Dat	e of Birth:		
Driver's License Nu	mber:	Jurisdiction that issue	ed Driver's L	icense:	
RS, MEMBERS AN	partnership, association or ND MANAGING MEMBE de additional information o	ERS OF THE ENTITY	, AS APPLIO	CABLE TO T	HE PARTIO
NAME	HOME ADDRES	SS, CITY STATE, ZIP	DOE	B POSITI	ION LA DIG S
Ownership [		ease or other arrangemexplain in detail):			No
If leased, list name of		explain in detail):			the lease:
If leased, list name of Landlord	Lease Other (e	explain in detail):date of expiration, EX		ney appear on	the lease:
If leased, list name of Landlord Building Owner's M	Lease Other (e	explain in detail):date of expiration, EX		ney appear on	the lease:
Landlord Building Owner's M	Lease Other (e	explain in detail):  date of expiration, EX  Tenant  City	ACTLY as the	ney appear on  Expires	the lease:
Endlord  Building Owner's Market Address  Contact Phone Num	Lease Other (end)  Of landlord and tenant, and  Italian Address:	explain in detail):  date of expiration, EX  Tenant  City	ACTLY as the	ney appear on  Expires	the lease:
If leased, list name of Landlord  Building Owner's Management of Street Address  Contact Phone Num  State the hours of op Monday	Lease Other (end)  Of landlord and tenant, and  Italian Address:	explain in detail): date of expiration, EX  Tenant  City  Friday	State	ney appear on  Expires	the lease:
Elf leased, list name of Landlord  Building Owner's Market Address  Contact Phone Num  State the hours of op Monday  Tuesday  Wednesday  Wednesday	Lease Other (end of landlord and tenant, and lailing Address:  bers:  beration each day:	cxplain in detail): date of expiration, EX Tenant  City  Friday Saturday Sunday	State	Expires  Zip C	the lease:
Elandlord  Building Owner's Mandlord  Street Address  Contact Phone Num  State the hours of op  Monday  Tuesday  Wednesday  Thursday	Lease Other (enterpolar deposits of landlord and tenant, and lailing Address:  Description each day:  to to to to to	cxplain in detail): date of expiration, EX Tenant  City  Friday Saturday Sunday	State  State	Zip C	the lease:
Elf leased, list name of Landlord  Building Owner's Management of Street Address  Contact Phone Num  State the hours of open of State the hours of open of State of S	Lease Other (enterpolate of landlord and tenant, and lailing Address:  Detailing Addre	cxplain in detail): date of expiration, EX Tenant  City  Friday Saturday Sunday	State  State	Zip C  totototo	the lease:  Code

Describe in detail the nature of you	r business:				
Will you have any employees who	do not reside within the dwelling?	If yes.	Yes , how ma	□ .ny?	No
Will there be more than one (1) vel occupation at any one (1) time?	hicle stopping at the place of business	s for the	purpose Yes	s of the	home No
Will there be more than eight (8) voccupation in any twenty-four (24)	ehicles stopping at the place of busin hour period?	ess for p	purposes Yes	of the h	ome No
Will there be deliveries to or from	the place of business?		Yes		No
If yes, how many times per week a	nd day?				
moveable items that are used for in equipment, restaurant equipment as	tangible personal property? (Tangible acome production. Examples would lead fixtures, and any other item or suppose the subject of tangible personal property:	be office oply used	e furnitur d to oper	e, busin	ess
Will you be storing, using or consuming in the City any articles of tangible personal property or taxable services purchased at retail? (Please refer to attached guidelines.)  Yes  No If yes, please describe the articles of tangible personal property to be stored, used or consumed in the City or taxable services purchased at retail:					
or the Federal Government?  If so, please provide proof of comp	licenses or permits issued by Jefferso		Yes		No
<ul><li>with jurisdiction over the occupation</li><li>* Not released pursuant to C.R.S. 2</li></ul>	• •				
Not released pursuant to C.K.S. 2					
complete to the best of my knowledge responsibility of my agents and emplo Rules and Regulations which govern n	Oath of Application be second degree that this application and and belief. I also acknowledge that it is a yees to comply with the provisions of the ny Home Occupation License. I further amendments to this application in the evation.	my respo e Edgewa acknowle	onsibility a ater Municedge that i	and the cipal Coat it is my	de and all
Authorized Signature	Printed Name and Title			ate	

- (a) A home occupation must meet all of the following criteria:
  - (1) The use of any portion of the property other than the principal and/or accessory residential buildings, including but not limited to the yard, shall be permitted only if it is demonstrated that such use will be accomplished without adversely affecting the residential character or appearance of the dwelling, without disturbing the peace, tranquility, safety and quiet of the residential zone district and without otherwise adversely affecting the neighborhood, and then only to the extent and in the manner allowed in the license, if a license is required.
  - (2) Exterior alterations or additions to an accessory building for the purpose of accommodating a home occupation are prohibited.
  - (3) There shall be no exterior storage or display of materials, goods, supplies or equipment used in the home occupation.
  - (4) Only one (1) nonilluminated sign not exceeding one (1) square foot in area and pertaining to the use thereof or providing the name of the home occupation shall be permitted. A vehicle sign displaying the name of the home occupation shall be counted for purposes of this Paragraph unless the sign is one which is painted onto the side of or is magnetically affixed to the vehicle.
  - (5) Not more than one (1) employee who does not reside within the dwelling may be employed in a home occupation.
  - (6) The parking, stopping or standing of any vehicle related to the home occupation shall be confined to the street frontage of the property containing the home occupation, the driveway and the garage or carport.
  - (7) The home occupation shall not generate noise, dust, vibration, odor, smoke, glare, electrical interference, fire hazard, traffic or parking congestion or any other nuisance or hazard which disturbs or tends to disturb the peace, tranquility, safety and quiet of a residential zone district.
  - (8) Storage of hazardous materials shall be permitted only in conformity with the Uniform fire code as adopted by the City.
  - (9) The home occupation shall not increase the life safety hazard rating of the principal building or any accessory building, as such rating is defined in the Uniform building code as adopted by the City.
  - (10) The home occupation shall comply with such additional requirements as are made conditions of the approval of a home occupation business license under Chapter 6.
  - (11) Except as specifically authorized by Paragraph (6) hereof, no street, alley or other public way of the City shall be occupied for any purposes associated with the home occupation.
- (b) Any occupation which is subject to county, state, or federal laws or regulations shall not be exempt from conforming to those laws and regulations when operated as a home occupation; however, nothing herein shall permit any such occupation to be operated as a home occupation if any of those laws and regulations conflict with any requirements of this Code. In addition, nothing in this Chapter shall exempt any home occupation from conforming to all ordinances and regulations of the City, excepting only the provisions of this Article pertaining to permitted uses in a Residential 1 District or a Residential 2 District.
- (c) Nothing in this Article shall authorize the operation of a home occupation in violation of any covenants, restrictions or conditions of record applicable to the property.



## LAWFUL PRESENCE AFFIDAVIT SOLE PROPRIETORSHIP

New License	License Renewal
I,	, dba ury under the laws of the State of Colorado that (check
swear or affirm under penalty of perjone):	ury under the laws of the State of Colorado that (check
I am a United States citizen, or I am a Permanent Resident of the I am lawfully present in the Un	he United States, or
benefit. I understand that state law re United States prior to receipt of this p fictitious, or fraudulent statement or a criminal laws of Colorado as perjury	nt is required by law because I have applied for a public equires me to provide proof that I am lawfully present in the public benefit. I further acknowledge that making a false, representation in this sworn affidavit is punishable under the in the second degree under Colorado Revised Statute 18-8-criminal offense each time a public benefit is fraudulently
Signature	Date
Form of ID Presented:	
Valid Colorado Driver's License, Colorado Documents.	ID card, Military ID, Coast Guard Mariner, Native American Tribal
STATE OF COLORADO COUNTY OF JEFFERSON	
I,day ofday of	Notary Public in and for said County and State, do, 20,appeared before me in person and executed the
above instrument.	
IN WITNESS THEREOF, I have her	reunto set my hand and seal.
	Notary Public
My commission expires:	