CITY OF HAWTHORNE

4455 W. 126th Street ● Hawthorne, CA 90250-4482

CONDITIONS REQUIRED TO CONDUCT A HOME OCCUPATION

1. The home occupation shall be clearly incidental and secondary to the use of the structure for dwelling purposes and shall not alter the residential character of the premises.

2. All operations shall be carried on within the dwelling, with not more than twenty (20) percent of the ground floor area of the dwelling to be used, including any area used for storage.

3. No motors other than electrically driven motors shall be used in connection with the home occupation, and that the total horsepower of such motors shall not exceed two horsepower, or one-half horsepower for any single motor.

4. No signs, advertising devices, merchandise or articles shall be displayed for advertising purposes.

5. The home occupation shall not generate an increase in vehicular or pedestrian traffic to the residence other than what would normally be associated with a residence.

6. No customers may come to the home occupation residence. All in-person contact must take place at an off-site location such as the customer's residence or place of business. The only exception will be a student arriving to a home occupation residence for the sole purpose of one-on-one music or arts instruction or academic tutoring. Music and arts instruction will be allowed only between the hours of nine a.m. to eight p.m. daily. Academic tutoring will be allowed only between the hours of nine a.m. to ten p.m. daily

7. No home occupation shall by reason of noise, odor, dust, vibration, fumes, electrical interference or other causes, disturb or have the potential to disturb the peace health, safety, or welfare of neighboring residents or property owners.

8. No home occupation in a rented or leased residential unit shall occur without the written authorization of the property owner or apartment manager.

9. There shall be no use of utilities for home occupations beyond what is normally associated with residential purposes.

REVOCATION OF PERMIT: The Director of Planning may, at any time, revoke a home occupation permit for noncompliance or for any violation of the conditions set forth in granting such approval. A written notice of intention to revoke shall be mailed to the applicant not less than ten days before the revocation. The applicant may appeal the decision to revoke the home occupation permit to the Planning Commission pursuant to the procedures set forth in Section 17.72.060 of the Hawthorne Municipal Code.

I, the undersigned, acknowledge that I have read and understand the above stated conditions for a home occupation permit and certify that I agree to operate the home occupation business in compliance with these conditions.

_____ _____

Signature of Applicant Date

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CONTACT NAME: _____

BUSINESS NAME: _____

ADDRESS: _____ **CONTACT NUMBER:**_____

PLEASE ANSWER THE FOLLOWING (any questions left blank will automatically result in denial of your application):

What type of business will you be conducting?_____

_____

In which area of your residence will the home occupation business be

conducted ? _____ How many square feet is this area? _____

Will you have any employees? Yes _____ No_____ If yes, please specify:

residing in the residence_____ # of 1099's employees (inside/outside the home)_____

What equipment and/or tools will be used? _____

Where in the home will the equipment and/or products be stored? _____

_____

Will trucks, trailers, or other equipment be used in your business? Yes _____ No_____ if yes,

What is the vehicle type? _____

Does the vehicle exceed three-fourths ton capacity? Yes_____ No_____

Address of storage location when not in use_____

What are the approximate hours of operation?
Mon. to Fri. _____ Sat. and Sun. _____.

Will you have an alarm system in your home? Yes_____ No_____

How many clients do you expect will visit your residence? (Music, Arts & Academic Tutoring

Businesses only) Mon to Fri _____ Sat _____ Sun_____

Will this be a cottage food business? If Yes, do you have any (State/County) Certificates/Permits?

_____.

PLEASE NOTE ALL APPLICATIONS ARE SUBJECT TO APPROVAL

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Please give a detailed description of the type of business activities and a listing of the types of merchandise that will be sold and/or the type of services that will be offered. Please write legibly, being very specific in your description. You may attach additional pages if needed.

Signature of Applicant

Date

FOR OFFICE USE ONLY:

Date:_____ Account No. _____

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HOME OCCUPATION PERMIT APPLICATION
PROPERTY OWNER'S
AUTHORIZATION FORM

TO BE COMPLETED BY THE APPLICANT ONLY:

Name:_____

Address:_____Telephone_____

Exact Name of Proposed Business/Home Occupation_____

_____

TO BE COMPLETED BY INDIVIDUAL PROPERTY OWNERS ONLY:

Property Owner (Please Print)_____

Property Management (Please Print)_____

Mailing Address_____

Telephone_____

I/we, the owners of the aforementioned property hereby authorize our tenant(s) to conduct their proposed home occupation. I/we understand that the operation of a Home Occupation is governed by the requirements contained in Section 17.72 of the Hawthorne Municipal Code and that the Home Occupation / Business Tax Certificate can be revoked at any time if the applicant fails to meet the conditions of approval.

_____
Signature(s) Date

_____ _____
Property Manager/Management (print) Date

_____ _____
Property Manager / Management Signature Date
(Must have authorization from property owner to sign on his/her behalf.)