

**City of Napavine**

P. O. Box 810  
Napavine, WA 98565  
(360) 262-9344 FAX (360) 262-9199

**CONDITIONAL USE – HOME OCCUPATION  
PERMIT APPLICATION**

City Use Only:

Date Received \_\_\_\_\_ Reviewed By \_\_\_\_\_

Permit Approved

Permit Denied      Comments \_\_\_\_\_

Fee: \$      Date Paid: \_\_\_\_\_      Receipt Number: \_\_\_\_\_

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Mailing Address      Phone

\_\_\_\_\_  
Owner Name / Mailing Address

\_\_\_\_\_  
Location of Worksite

\_\_\_\_\_  
Legal Description (May be attached)

\_\_\_\_\_  
Parcel No.

**PROPERTY ZONING:**

Yes      No

1. Please state the home occupation in which you propose to engage.  
\_\_\_\_\_

2. Will the home occupation utilize more than twenty five percent (25%) of the actual total floor area on one floor

- |   |                          |                          |
|---|--------------------------|--------------------------|
| within the dwelling?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Will the home occupation be a secondary use of the home?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Will structural alterations of the dwelling be required to accommodate the home occupation?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Do you propose to construct a separate exterior entrance to the space devoted to the home occupation?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Will others not in the immediate family be engaged in the home occupation?   | <input type="checkbox"/> | <input type="checkbox"/> |
|   | <b><u>YES</u></b>        | <b><u>NO</u></b>         |
| 7. Will more than two (2) family members be engaged in the home occupation?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Do you intend to use commercial advertising for your home occupation?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. If your answer to question # 8 was yes, please state type of advertising. _____  |                          |                          |
| 10. Do you propose to use window displays or display sample commodities outside of the dwelling?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Do you propose to store stock in trade or commodities for sale that are not produced on the premises?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Would materials or equipment used in the home occupation create loud noises, dust, smoke, odors, radio and television interference, or other detriments to the residential setting? | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Please describe how materials or commodities will be delivered to and from your home. _____<br>_____<br>_____   |                          |                          |
| 14. Would the home occupation generate more traffic on streets adjacent to your home?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. If the answer to question 14 is yes, state how many more and where they will be parked. _____<br>_____<br>_____   |                          |                          |
| 16. Would your home occupation require a significant increase in electrical power, water and sewer use?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Would your home occupation increase the danger of fire in your neighborhood?  | <input type="checkbox"/> | <input type="checkbox"/> |

CONDITIONAL USE – HOME OCCUPATION PERMIT

I have answered all questions to the best of my knowledge and understand that if not answered truthfully, my permit, if granted, may be revoked. I understand that the conditional use filing fee is non-refundable.

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Applicant Signature

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Title

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Date