

Zoning Inspection Permit

Home-Based Businesses

Instructions: Complete this form and submit to community.development@herndon-va.gov or in person at 777 Lynn Street, 2nd Floor, Herndon, VA 20170. Typed signatures will be accepted.

Home Based Business Information

Name of Home-Based Business:

Name of Business Owner:

Business Street Address:

Suite Number:

Business Phone Number:

Business Email:

Business Website:

Total floor area used by this business:

SF

Business Description

Describe: The type of products, merchandise, or services the business will provide.

Attach: Pictures or catalog representations of the product or merchandise for sale.

Are client visits scheduled by appointment? [] No [] Yes

Is this a home-based daycare? [] No [] Yes*

*If yes, number of children/clients _____

Do you have any company vehicles? [] No [] Yes*

*If yes, quantity and type: _____

Will you receive deliveries after normal business hours?

[] No [] Yes*

*Restrictions occur between 10PM--7AM

*If yes, please explain: _____

Applicant Signature

I hereby certify that I have authority of the owner or agent to make this application, that the information is complete, and that if a permit is issued the construction and/or use will conform to the Zoning Ordinance, the Building Code, applicable laws and regulations including private building restrictions, if any, which relate to the property. I further certify that I have received and read the prohibited sign regulations.

Applicant Signature (REQUIRED) _____

*A Typed Signature is acceptable

Applicant Name (PRINTED) _____

Phone _____ Email _____

Please see reverse side for Property Owner's Consent Certifications

Property Owner or Applicant Signature

I hereby authorize the home-based business as presented by the applicant to be conducted in conformance to the Section 78-80.5 of the Zoning Ordinance.

In lieu of having property owner sign, I as the applicant, have provided the front page and signature page of a legally executed lease

Property Owner/Applicant Signature (REQUIRED) _____

*A Typed Signature is acceptable

Property Owner/Applicant Name _____

Phone _____ Email _____

Note:

An approved inspection is required before a business license will be issued for the home-based business. Submission of photos or a videoconference may be allowed in lieu of an in-person visit, at the discretion of the Community Inspector.

Please contact the office for details at 703-787-7380

List of Prohibited Businesses

The on-site storage of explosives, hazardous and/or toxic materials; on-site services to clients other than by appointment; on-site sales of any goods other than by appointment; on -site restaurant or carry-out service; on-site repair or painting of motor or other vehicles; animal hospitals, kennels or any other business involving the on-site care or feeding of animals; boarding house or similar; mortuary or funeral home; a delivery service by which goods or other property to be delivered are stored or brought on-site; welding, machine shop, pipe fitting operation, or similar; rental of on-site equipment, goods or property; nursing home; small -scale alcohol production facility; similar uses to those above. The above businesses are a summary of Section 78-80.5(a)(2) and not a comprehensive list.

Town of Herndon- Office Use Only

Tax Map _____

Historic District? Yes No

Architectural Review Board (ARB) / Re-zoning with Proffers / Special Exception / Variance

Date of Approval _____ Proffers Reviewed by _____

*Attach a copy of **any** conditions or proffers approved or imposed by Town Council, Architectural Review Board or the Board of Zoning Appeals

Zoning Official Approval Signature

This Application is Approved By _____ Date _____
Zoning Official

Zoning Official Comments _____

