



Staff Use Only

Application Number: _____

Received By: _____

Date: _____

Home Occupation Permit Application Form

1. **Business/occupation name and location** (*street address*): _____.

2. **Contact information:** (*a list of additional contacts may be attached*)

Owner Name: _____

Mailing Address: _____

Telephone: _____ Fax: _____

E-mail: _____

3. **Please attach the following items:**

a. Description of the business activity including:

1. number of employees and their relationship to the owner

2. total square footage of dwelling/ accessory building(s) and percentage of each used for the business/occupation

3. number of client trips and/or deliveries per day

b. Application fee of \$100.00.

4. **Certification:** (*must be signed in blue ink*)

I certify that the information and attachments I have submitted are true and correct to the best of my knowledge. In filing this application, I affirm that I am the business owner and understand that I am responsible for all other licenses, permits, bonds and/or insurances required by the City of Craig, Moffat County, the State of Colorado and/or any other governing agency..

Applicant: _____ Date: _____

For additional information, please see the Craig Land Use Code 16.03.010.