



P.O. Box 2475, Surf City, NC 28445  
 Phone (910) 328-4131 Fax (910) 328-4132  
[www.townofsurfcity.com](http://www.townofsurfcity.com) [comdev@townofsurfcity.com](mailto:comdev@townofsurfcity.com)

DATE: \_\_\_\_\_

FEE: \_\_\_\_\_

## HOME OCCUPATION COMPLIANCE FORM

Requirements for Home Occupations per the Town of Surf City Zoning Ordinance:

### Home Occupation-Definition

An occupation for gain or support conducted entirely within a dwelling and carried on by the occupants. The use must be clearly incidental and secondary to the use of the dwelling for living purposes. The use must not change the character thereof. Furthermore, there must be no display, no stock-in trade, nor commodity sold upon the premises and employment must be in connection with the home occupation. Such occupation shall be carried on solely within the main dwelling and shall not occupy more than 25% of the floor area of the dwelling.

### **HOME OCCUPATIONS (R-5, R-10, R-20, MHS)**

- a) Such business shall not change the character of the dwelling or constitute a nuisance for the neighborhood. Beauty parlors and Barbershops shall not be considered home occupations.
- b) No outside storage or displays associated with the home occupation is permitted.
- c) No more than 25% of the home shall be used in connection with the home occupation. The applicant shall provide a sketch showing the floor plan and the area thereof to be utilized for the conduct of the home occupation including total floor area of the residence. (Attach Sketch)
- d) A maximum of 1 non-resident employee, contracted or otherwise hired, is permitted in the home.
- e) One company vehicle shall be permitted per home, otherwise only vehicles used primarily as passenger vehicles shall be permitted in connection with the home occupation.
- f) Signage is permitted on the vehicle.
- g) Customers may only visit premises between the hours of 7 a.m. and 6 p.m.
- h) One, four square foot wall sign is allowed on premise.
- i) The community development department shall issue a home occupation permit. The applicant must also obtain all other applicable permits.

Business Name/Type \_\_\_\_\_

Business Phone Number \_\_\_\_\_ Business Address \_\_\_\_\_

Total Floor Area of Home \_\_\_\_\_

Percentage of that will be used for business \_\_\_\_\_%

**I have read, understand and will comply with the above zoning regulations at all times.**

\_\_\_\_\_  
 Name of Property Owner (if any)

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Telephone Number