

# **CEDAR FORT HOME OCCUPATION/BUSINESS LICENSE INFORMATION**

(From: CEDAR FORT ORDINANCE # CFO-310-HO-2016 January 2016

Title: Home Occupation / Home Business)

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## **Town of Cedar Fort**

50 East Center, Cedar Fort, UT 84013 PHONE (801) 768-2147

### *HOW TO APPLY FOR A CEDAR FORT HOME OCCUPATION/BUSINESS LICENSE*

Note: There are two basic types of Home Businesses. A **Home Occupation** is where clients or customers come to your home, and a **Home Business** is where the owner performs services at an individual's homes.

(Please retain for your records)

The Town wishes to offer assistance with the application process and has designed this set of procedures to help you understand some of the requirements for opening a business in your home.

1. Generally, businesses involved with the sale of a tangible product must apply for a State Sales Tax number. You may obtain that number from the State Tax Commission at 210 N. 1950 W., Salt Lake City. If you anticipate commencing business in less than 6 weeks, you will need to apply for that number in person. There is no charge. If the business is a sole proprietorship (or other similar circumstance where there is no immediate need for an EIN number) you may apply for the State Sales Tax Number at the same time as you apply for the DBA (item #2 below). You may obtain both items at the Heber Wells address below. You must provide written proof of a valid sales tax number.
2. If you wish to use a business name (DBA), you must register that name with the State Division of Corporations, Assumed Name Section, located at the Heber Wells Building at 160 E. 300 S., Salt Lake City. The current charge is \$22.00 for three years. You must file a written copy of your DBA at the time you file your Home Occupation application. If the business is a Limited Liability Company or Incorporated and you are conducting business using the LLC or corporate name, you must file a State approved copy of the Articles.
3. If the business is being run from rental property, a letter of permission (indicating the portion of the home permitted to be used, and acknowledging the nature of the business) must accompany the application.
4. Applications are to be typed or completed in black ink. Incomplete applications will be returned. Ordinance allows up to 30 days for processing.

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5. Any daycare, preschool, or caregiver type services to the elderly, or other business as deemed necessary for the continued safety and well being of the citizens and the community and as permitted by law, will also need to submit a BCI criminal history report at the time of application. That report may be obtained through the Bureau of Criminal Investigations located at 3888 West 5400 South, SLC UT 84114, ph. (801) 965-4445. Current charge is \$10.00.

6. Fees for all licenses are established by the Town Council. A copy of the most recently approved fees is available at Town Office. All appropriate fees must accompany the application. Please contact this office for correct computation of pro-rated amounts for regulatory and any applicable disproportionate fees. A \$35.00 charge is assessed to checks returned by any financial institution.

7. A copy of the Home Occupation ordinance is available for a nominal charge at the Town Office. Please make sure you are able to comply with those requirements. If you fall under a Category II Home Occupation, you must first receive an approved Operational Use Permit, before submitting this application for a Home Occupation License. If you have questions regarding any portion of the ordinance, you should contact the Town Clerk for correct interpretation or explanation.

8. There are additional requirements for client-access occupations, group child uses, garage uses, accessory building uses, wood working or other flammable uses etc. for which you may incur additional inspection, and/or permit costs and application processing delays. Please check with the Town office for further information.

9. License renewals are due by January 1 each year. Your Occupation License will indicate an expiration date. Renewal notices will be sent to you as a reminder, but you are ultimately responsible for making sure renewal payments are received prior to delinquency. A 25% delinquent late fee penalty is assessed on accounts not paid within 30 days of due date. After 60 days, an additional 50% delinquent penalty is assessed. If a bill is delinquent after 90 days, it is forwarded for collection. Collection costs are incurred by the applicant.

Please familiarize yourself with license renewal due dates and delinquency rates indicated on both this information sheet and the application page. You must be willing and able to comply with all provisions of the ordinance for license approval.

**If you have questions or need assistance in completing this application, please contact the Town Clerk at 801-768-2147 and we will be pleased to be of assistance.**

# CEDAR FORT HOME OCCUPATION/BUSINESS LICENSE APPLICATION

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**APPLICATION FOR:**

- HOME OCCUPATION LICENSE**    Client/customer comes to applicant's residence
- HOME BUSINESS LICENSE**    Applicant goes to client/customer's residence

**FOR OFFICE USE ONLY**    APPLICATION # \_\_\_\_\_    FEE : \$ \_\_\_\_\_

APPLICATION DATE: \_\_\_\_\_    FEE PAID: \_\_\_\_\_    RECEIPT # \_\_\_\_\_

Zone \_\_\_\_\_

Duplicate License	\$20	Inspection Fee	\$30	Other		TOTAL DUE
License Fee	\$35	Penalty	Double			

Building Inspections    Cleared \_\_\_\_ Date \_\_\_\_\_

Planning and Zoning    Cleared \_\_\_\_ Date \_\_\_\_\_ Current Zone \_\_\_\_\_

Health Department    Cleared \_\_\_\_ Date \_\_\_\_\_

Sheriff    Cleared \_\_\_\_ Date \_\_\_\_\_

Code Compliance    Cleared \_\_\_\_ Date \_\_\_\_\_

Fire Dept.    Cleared \_\_\_\_ Date \_\_\_\_\_

**\*\*PLEASE PRINT OR TYPE IN BLACK INK\*\***

Business Name		Business Phone #	
Residence Address:		City and State	Zip
Mailing Address		City and State	Zip
Start Date	Sales Tax #	Corp/LC/DBA/Other	Fax #
Homeowner of property?	If NO, Letter of permission?	Home Phone #	Portion of Home Used
Operational use?			

This application is subject to approval from the Cedar Fort Town Council (a background check may be required on some specific types of businesses). Applications may also require approval of the Cedar Fort Fire Department, Building Inspection Department, County Health Department and Zoning Department. Those specific types of uses requiring on-site inspections are subject to a \$30.00 charge over and above the regulatory and disproportionate license fees. If a license renewal fee is not paid within 30 days of the due date, a 25% late fee will be assessed. After 60 days, an additional 50% late fee penalty will be assessed. If a license is not obtained prior to opening your business, you may be subject to a double license fee penalty!

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Name : \_\_\_\_\_ phone # (\_\_\_\_) \_\_\_\_\_

Authorized agent (if applicable) : \_\_\_\_\_

1. What is the proposed Home Occupation (business)? \_\_\_\_\_

2. How many clients (cars and people) will be coming to the home as a result of this application at any one time during a daily interval? \_\_\_\_\_

3. What type of equipment, materials, tools, chemicals, and/or merchandise stock are involved in the Home Occupation?

4. What internal modifications to the residential structure are anticipated because of the Home Occupation?

5. What type of safety equipment will be required for the Home Occupation?

6. What portion of the home will be used for the Home Occupation (please attached sketch showing home dimensions)?

7. What current certifications or professional license do you possess for this occupation (proof of certification or license will be required)?

8. How many employees that do not reside on the premises will be working on location in the Home Occupation? \_\_\_\_\_

I certify under penalty of perjury that this application and all information submitted as a part of this application are true, complete and accurate to the best of my knowledge. I also certify that I am the owner of the subject property and that the authorized agent noted in this application has my consent to represent me with respect to this application. Should any of the information or representations submitted in connection with this application be incorrect or untrue, I understand that The Town of Cedar Fort may rescind any approval, or take any other legal or appropriate action. I also acknowledge that I have reviewed the applicable sections of the Cedar Fort Ordinance and comply with them and that items and checklists contained in this application are basic and minimum requirements only and that other requirements may be imposed that are unique to individual projects or uses. Additionally, I agree to reimburse the Town of Cedar Fort all amounts incurred by the Town in excess of the base fee required by the Fee Schedule to review and process this submitted application. I also agree to allow the Staff, Planning Commission, or Town Council or appointed agent(s) of the Town to enter the subject property to make any necessary inspections thereof.

Property Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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OPERATIONAL USE REQUIREMENTS

Business Name: \_\_\_\_\_

ADDITIONAL OPERATIONAL CONDITIONS IMPOSED BY THE PLANNING/ZONING OR TOWN COUNCIL FOR THE HOME OCCUPATION

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I \_\_\_\_\_, I understand and agree to comply with all of the rules for Home Occupation, including these operational provisions. I also understand that if I do not comply with all of these rules, my business license may be revoked.

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

Building and Fire Code Checklist (to be completed by Fire Chief):

- Building shall comply with current U.F.C. requirements
- Aisles - 36" wide with obstructions on one side  
- 44" wide with obstructions on both sides
- Storage of combustibles away from heat source
- Storage of flammable liquids and gases in approved containers
- Portable fire extinguishers (10# min.) must have approved tag
- Fire extinguishers must be visible, readily accessible, and properly mounted
- Address number on building and visible from street
- Exits - Doors open able from inside building without use of key or knowledge  
- Clear and unobstructed
- Stairways to have handrail
- 30" clearance in front of electrical control panel with accurate labels on panel box
- Extension cords and adapters to conform with Building and Fire Code requirements
- Other hazards that might threaten health and safety

Date: \_\_\_\_\_ Fire Chief Initials : \_\_\_\_\_

The signature of the Fire Chief, if required, must be obtained prior to appearance before the Town Council.

Fire Chief \_\_\_\_\_ Date: \_\_\_\_\_

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HOME OCCUPATION PRELIMINARY/OPERATIONAL APPROVAL

THIS CERTIFIES THAT \_\_\_\_\_ HAS COMPLETED ALL OF THE REQUIREMENTS FOR A HOME OCCUPATION LICENSE AS DEFINED IN THE CEDAR FORT TOWN ORDINANCE CFO-310-HO-16

DATED \_\_\_\_\_ 20\_\_\_\_.

THIS PRELIMINARY APPROVAL IS TO BE PRESENTED TO THE TOWN COUNCIL TO RECEIVE A HOME OCCUPATION OR HOME BUSINESS LICENSE THAT IS VALID FOR ONE YEAR FROM THE DATE SIGNED OR JANUARY OF THE FOLLOWING YEAR, WHICHEVER COMES FIRST. THE LICENSE MUST BE RENEWED ANNUALLY AND MUST BE POSTED IN A CONSPICUOUS PLACE ON THE PREMISES.

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

For official use only

Town Council

Approved \_\_\_\_\_

Date \_\_\_\_\_

Disapproved \_\_\_\_\_

Councilman over Licenses

COUNCILMAN - LICENSES