

**THE BOROUGH OF SEWICKLEY  
HOME OCCUPATION REGISTRATION**



Date: \_\_\_\_\_

Name of Occupant : \_\_\_\_\_ Name of Business : \_\_\_\_\_

Address of Home Occupation : \_\_\_\_\_

Phone: Daytime : \_\_\_\_\_ Evening: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Property owner name: \_\_\_\_\_

Property owner address: \_\_\_\_\_

Phone: Daytime \_\_\_\_\_ Evening: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Location of property: \_\_\_\_\_

Block/lot #: \_\_\_\_\_ Zoning district: \_\_\_\_\_

Number of Employees: Family \_\_\_\_\_ Other than Family \_\_\_\_\_

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

Social Security # \_\_\_\_\_

Address: \_\_\_\_\_

Phone: Daytime \_\_\_\_\_ Evening \_\_\_\_\_

Fax \_\_\_\_\_ email: \_\_\_\_\_

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

Social Security # \_\_\_\_\_

Address: \_\_\_\_\_

Phone: Daytime \_\_\_\_\_ Evening \_\_\_\_\_

Fax \_\_\_\_\_ email: \_\_\_\_\_

Brief Description of Activity: \_\_\_\_\_

Total Square Footage of the structure: \_\_\_\_\_

Total Square Footage of the Business: \_\_\_\_\_

Percentage to be used for Business: \_\_\_\_\_

Number of Off-Street Parking Space(s): \_\_\_\_\_

Location of Off-Street Parking Space(s): \_\_\_\_\_

Number of On Street Parking Spaces: \_\_\_\_\_

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1. Will there be any alterations made to the structure?  YES  NO  
If yes, Permit # \_\_\_\_\_
2. Will there be any vehicular traffic generated?  YES  NO
3. Will there be any pedestrian traffic generated?  YES  NO
4. Will all required parking be met Off-Street?  YES  NO
5. Will any part of the home occupation be  
conducted away from the premises?  YES  NO
6. Will any materials be stored on the premises?  YES  NO
7. Will there be any noise, odor, vibrations or  
electrical interference or the like to be generated?  YES  NO
8. Will there be any signage?  YES  NO

Under the Penalty of Law, I (We) certify that the above information is correct.

Name: (printed) \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
PROPERTY OWNER(S) SIGNATURE

\_\_\_\_\_  
DATE

(Must be notarized if the property owner is not the applicant)

**Approved:** \_\_\_\_\_ **Denied:** \_\_\_\_\_

Reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Occupancy Permit # \_\_\_\_\_ Date Issued: \_\_\_\_\_

Issuing Officer: \_\_\_\_\_