



Home Occupation

Sweetwater County Land Use
80 West Flaming Gorge Way, Suite 23
Green River, WY 82935
p: (307) 872-3914 / 922-5430 f: 872-3991
landuse@sweet.wy.us

Date of Submittal: _____
Permit Number: _____
Present Zoning: _____
PID: 04- _____ - _____ - _____ - _____ - _____

Approved Conditions:
 Call Jim at (307) 872-3923 for IFC Inspection when construction is complete.

 Denied/Reason: _____
Date of Action: _____ Land Use Official Signature: _____

Application Fee: \$50.00

GENERAL INFORMATION

Lot and parcel development standards are found in Section 4 of the 2015 Zoning Resolution. Please make sure that your development and lot or parcel meets these required improvements.

Sweetwater County has adopted and will inspect for the International Fire Code. Sweetwater County has not adopted and does not enforce the International Residential Code or the International Building Code. It is the applicant's or landowner's responsibility to ensure that construction standards are met and buildings and structures are inspected.

Please fill the application out completely; incomplete applications will be returned. Attach all required supporting documentation and additional information which may be required for approval of your application. Regulations may be found in Section 9 of the 2015 Zoning Resolution.

CONTACT INFORMATION

Property Owner of Record Contact Information

Name: _____
Company: _____
Address: _____

Phone: _____
Email: _____

Applicant/Business Owner Contact Information

Name: _____
Company: _____
Address: _____

Phone: _____
Email: _____

PROPERTY INFORMATION

County Assigned Address: _____ Lot Size: _____ (acres)
Project Location: Quarter(s): _____ Section: _____ Township: _____ Range: _____
Subdivision Name: _____ Lot: _____ Block: _____
Overlay District: Highway Scenic Slope

HOME OCCUPATIONS – See Section 9 of the 2015 Zoning Resolution & Attach Any Special Requirements

Home Occupations shall comply with all applicable zoning district and development standards of Sweetwater County. Permits are granted for a period of one year, with yearly renewals. Home Occupations shall only be operated between the hours of 7:00 a.m. and 10:00 p.m. Outside storage shall require approval from the Department. One off-street parking space is required per 200 square feet of area devoted to the Home Occupation.

- | | | |
|---|---|---|
| <input type="checkbox"/> Accounting, Tax & Payroll Services | <input type="checkbox"/> Fine Arts Studio | <input type="checkbox"/> Professional Services |
| <input type="checkbox"/> Animal Grooming | <input type="checkbox"/> Hair Salon | <input type="checkbox"/> Real Estate Services and Appraisal |
| <input type="checkbox"/> Baking & Cooking | <input type="checkbox"/> Information & Data Processing Services | <input type="checkbox"/> Recording Studio |
| <input type="checkbox"/> Catering | <input type="checkbox"/> Insurance Sales | <input type="checkbox"/> Small appliance and small engine repair |
| <input type="checkbox"/> Child or Adult Care | <input type="checkbox"/> Interior Decoration | <input type="checkbox"/> Tailoring Services |
| <input type="checkbox"/> Computer Services | <input type="checkbox"/> Mail Order Business | <input type="checkbox"/> Teaching of Crafts and Incidental Sale of Supplies |
| <input type="checkbox"/> Contractor's Business | <input type="checkbox"/> Massage or Physical Therapy | <input type="checkbox"/> Tutoring |
| <input type="checkbox"/> Copier/Office Machine Repair | <input type="checkbox"/> Musical Instruction | <input type="checkbox"/> Rural Home Occupation – Machine Shop/Metal Working |
| <input type="checkbox"/> Drafting Services | <input type="checkbox"/> Musical Instrument Tuning & Repair | <input type="checkbox"/> Rural Home Occupation – Motor Vehicle and Engine Repair |
| <input type="checkbox"/> Engineering, Architecture and Landscape Architecture | <input type="checkbox"/> Offices for Professional, Scientific or Technical Services | |
| <input type="checkbox"/> Financial Planning and Investment Services | <input type="checkbox"/> Photographic Services | |

Name of Business: _____

Describe Specific Activity: _____

Contact Information for Any Other Agency Under Which Your Use is Also Regulated:

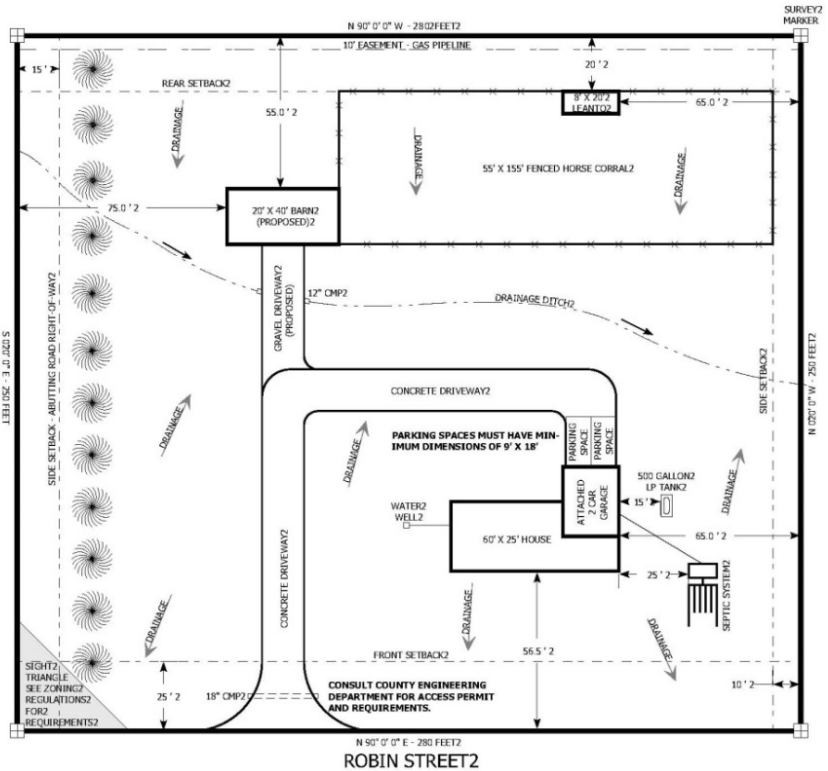
Agency: _____	Agency: _____
Contact: _____	Contact: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
Email: _____	Email: _____

PERMIT SUBMITTAL REQUIREMENTS

The following information and supporting documentation must be included with this application:

1. **Site Plan:** A site plan, legibly drawn to scale and based on legally established lot corners that are permanently marked and identified, showing the following information:

- a. Address of the property
- b. Legal description
- c. Location and dimensions of the land area in question
- d. Size, shape, dimensions and location of existing or proposed structures
- e. Location of fire hydrants
- f. Access including dimensions, distance from property corners and size of culvert
- g. General drainage of lot or parcel
- h. Parking and loading areas as required
- i. Commercial signage, if applicable
- j. Septic and well locations
- k. Fuels being used or stored on the property
- l. Utilities
- m. Easements
- n. Outdoor storage areas
- o. Residential floor plan including rooms labeled and dimensioned, size of egress windows and doors, location of required smoke alarms and carbon monoxide detectors, type of door hardware, hallway widths, width of stairs and garage or building separation material
- p. Commercial floor plan including rooms labeled and dimensioned, size of egress windows and doors, location of smoke alarms, type of door hardware, hallway widths, width of stairs and garage or building separation material, location and type of exit signs, details of emergency lighting plan and location of fire extinguishers



2. **Water and/or Sewer Supply:**

- a. Private Wyoming State Well Permit Number or Name of Water District: _____
- b. Private Septic System Permit Number or Name of Sewer District: _____

SIGNATURE REQUIRED

I acknowledge that I have read and understand this application and the pertinent regulations. I further agree if the permit is approved, I will comply with all regulations and conditions of approval. I grant Sweetwater County the right of ingress/egress as reasonably necessary to determine compliance with County regulations or conditions of this permit. I certify that the information provided with this application is true and correct.

Signature of Owner of Record

Date

Signature of Applicant/Agent

Date