



DEPARTMENT OF PLANNING SERVICES
124 10th STREET
P.O. BOX 775088
STEAMBOAT SPRINGS, COLORADO 80477
(970) 879-2060

USE WITH CRITERIA (CR) CHECKLIST FORM

A completed Application Form must accompany this form.

HOME OCCUPATION

Applicant Name: _____ Date: _____

Applicant Address: _____
_____ Phone: _____

Owner's Name/Address/Phone (If different from applicant): _____

Zoning: _____

Address/Legal Description of CR: _____

Are the following attached:

- Submittal requirements: Yes No

The proposed **HOME OCCUPATION** use meets all of the following criteria:

_____ Review shall be prior to development or building permit, as applicable.

_____ The exterior appearance of the dwelling and lot shall not be altered, nor shall the occupation within the dwelling be conducted in manner which would cause the premises to differ from its residential character by the use of colors, materials, construction, lighting or signage, or by the emission of sounds, noises, dust, odors, fumes, smoke, or vibrations detectable outside the dwelling unit.

_____ The dwelling unit shall continue to be used primarily for residential purposes and the occupational activities shall be harmonious with the residential use.

_____ There shall be no sale and/or display of merchandise which requires customers to go to the property.

_____ No more than one customer or client vehicle associated with the home occupation shall be at the home at one time and no more than two (2) of the weekly trips to the home shall be related to the delivery of products and/or materials, with the exception of day care homes.

_____ No more than twenty (20) percent of the Gross Living Area shall be used for the home occupation and any related storage of supplies and materials.

_____ The use of utilities shall be limited to that normally associated with the use of the property for residential purposes.

_____ There shall be no on-premise signs advertising the home occupation.

_____ Only one vehicle no larger than one ton may be related to and used in conjunction with the home occupation and shall be parked on site.

_____ Only one home occupation shall be permitted per residence unless more than one home occupation can be operated where the combination of the home occupations utilize no more than twenty (20) percent of the living space.

_____ These criteria may be altered upon reasonable cause and with written approval by the Director.

I understand that I must maintain compliance with all of the criteria listed above.

Signature of Applicant: _____ Date: _____

<p>For Office Use Only: Use with Criteria received by: _____ Date: _____ Is a Use with Criteria fee applicable? Yes _____ No _____ If yes, Fee Paid? Yes _____ No _____ Check # _____ Form and Submittals Complete: Yes _____ No _____ Use with Criteria Approved: Yes _____ No _____ Date: _____ Signature of Director: _____</p>
