



Application:	
Date Rcvd.:	
Received by:	

**HOME OCCUPATION / HOME-BASED BUSINESS PERMIT CHECKLIST**

1. Applicant's Name:	
Contact Person:	
Address:	
Telephone:	
Email:	
Relationship to Owner:	

2. Property Address:	
Development Name:	
Zoning District:	
Block(s):	
Lot(s):	

3. Property Owner:	
Contact Person:	
Address:	
Telephone:	
Email:	

4. Name of Attorney:	
Firm:	
Address:	
Telephone:	
Email:	

5. Description of Property, brief history of the site, its location and description of current use(s) (may attach addendum):

6. INFORMATION ABOUT PROPOSED HOME-BASED BUSINESS (Please note, any changes shall require a new application and permit)		Response
a. Name of proposed home based-business:		
b. Type of proposed business:		
c. Days and hours of operation:		
d. Number of proposed employees (including homeowner):		
e. Total square footage of home:		
f. Total square footage for home-based business use:		
g. Are any commercial vehicles proposed to be stored on site? *:		
h. Is there any outdoor storage proposed (goods, trailers, material, equipment, etc.)? *:		
i. Other than within the home, will any portion of the property be used for the business? *:		
j. Do you propose any customers or clients come to the site? *:		
k. Is there any signage proposed? *:		
l. Any provisions of the Home Occupation or Land Use Ordinances that cannot be met? *:		

\* Explain any "Yes" responses in the Narrative (Checklist item #11 below)

**INSTRUCTIONS:**

1. This checklist shall be completed by the applicant or its authorized representative and submitted with the application. This checklist shall be used in determining completeness or incompleteness of the application pursuant to Robbinsville Township's Land Use and Development Ordinance(s). The applicant is advised that failure to provide all data required on this checklist or failure to apply for the appropriated waivers will render the application incomplete. Applications will not be placed on an agenda until it has been deemed complete by the Administrative Officer.
2. Applicant to complete checklist column with an "X" in the appropriate column. A waiver should be requested for all checklist item you may consider "not applicable" ("n/a") and reason(s) you would consider it "not applicable." \*\* All waivers requested should be explained in detail on the Waiver/Variance Request Form. Failure to provide a reason for the request will render the application incomplete.
3. The Technical Review Committee (TRC) will determine if any item where a waiver is requested shall be required to be provided and the application shall be considered incomplete if not provided. Once complete, the application will be forwarded to the Zoning Officer for review and consideration of the Zoning Permit.
4. The applicant shall submit three (3) collated copies of all correspondence (including cover and response letters) and administrative forms. The applicant shall submit three (3) signed and sealed copies of all maps, plans or reports and all additional submission item(s). All submissions must include a digital copy in pdf. format of all submission items (email to [BoardSecretary@robbinsville.net](mailto:BoardSecretary@robbinsville.net), dropbox, thumb drive or disk). All re-submissions must include a point-by-point response letter addressing all comments from the Township's professionals or from the Technical Review Committee (TRC) Meeting. All submissions must be made as one comprehensive submission, not under separate cover.

<b>I. ADMINISTRATIVE</b>			
<b>Township Use Only</b>		<b>Provided per Checklist</b>	<b>**Waiver Requested</b>
<input type="checkbox"/>	1. Completed General Land Use Application Form.		
<input type="checkbox"/>	2. Completed Fee Schedule Form.		
<input type="checkbox"/>	3. Payment of Required Fee(s).		
<input type="checkbox"/>	4. Tax & Utility Assessment Certification Form (Applicant part complete)		
<input type="checkbox"/>	5. Completed Waiver/Variance Request Form**.		
<input type="checkbox"/>	6. Completed Affidavit of Ownership Form (notarized).		
<input type="checkbox"/>	7. Completed Disclosure Statement Form.		
<input type="checkbox"/>	8. Completed Consent of Entry Form – This consent shall remain in effect for the duration of the Home Occupation/Home-Based Business Permit, pursuant to the provisions of the ordinance.		
<input type="checkbox"/>	9. Zoning Permit Application for this Request for Home-Based Business (Submitted to Zoning Officer once Application is deemed Complete).		
<input type="checkbox"/>	10. "Zoning Permit Denial" or "Notice of Violation" (N.O.V.) from Zoning, Code or Construction Official.		
<input type="checkbox"/>	11. Proposed Operations Statement/Narrative, including details of proposed use(s), nature of the business use proposed, hours of operation, number of employees, provisions for parking and deliveries, etc. This statement shall attest to the Applicant's ability to comply with the conditions of the Home Occupation/Home-Based Business Ordinance. The description shall also indicate the applicant's permission to permit inspection by the appropriate Township officials at the time of application and shall also include a right-of-entry to permit future inspections as may be required as a result of complaints or information submitted to Township officials indicating a deviation from any permit or approval pursuant hereto or from the provisions of the permit and ordinance, signed by Applicant and notarized.		

<input type="checkbox"/>	12. Current Survey (< 5 years old), signed and sealed by a licensed surveyor, drawn to scale, accurately showing all existing conditions (including fencing, pavement, pools, all buildings and structures), with accurate distances from property lines shown. If any external improvements have been made to the property since the last survey performed by a licensed surveyor (ex: fence, shed, pool, etc.), the applicant shall be required to provide an updated survey prepared by a licensed surveyor.		
<input type="checkbox"/>	13. Sketch of the floor plan of the house for each floor of the house shall be provided and drawn to scale. The plans shall label the use and size of each room throughout the house. The area to be dedicated to the home-based business shall be clearly marked on the plans.		
<input type="checkbox"/>	14. Resolution(s) for all previous Planning/Zoning Board applications or Home Occupation Permits		
<input type="checkbox"/>	15. Photographs of property views from street and all other off-site area(s), aerial photos of site showing current conditions.		
<input type="checkbox"/>	16. Complete application, filed as one submission, with quantities and digital copies as noted in the Instructions, #4.		

Person Preparing Checklist:	
Firm:	
Address:	
Telephone:	
Email:	

**CERTIFICATION:**

I have prepared this checklist and confirm that I have provided a response to all waivers being requested and listed all variance relief sought on the Waiver/Variance Form. I certify that the checklist is complete and accurate.

Should the Zoning Officer determine that the application does not meet the provisions of the ordinance for a Home Occupation/Home-Based Business, the Applicant cannot operate the business without proper approvals. Any change or expansion of any approval granted will require a new application and permit and may require application to the Zoning Board of Adjustment for relief and site plan approval.

\_\_\_\_\_  
Signature/Certification of Person Preparing Checklist

\_\_\_\_\_  
Date

**TOWNSHIP USE ONLY BELOW THIS LINE**

Application No: \_\_\_\_\_ Fee(s) Paid: \_\_\_\_\_

Approved / Denied: \_\_\_\_\_ Zoning Permit Number: \_\_\_\_\_

If denied, reason for denial: \_\_\_\_\_