



TOWN OF SEILING  
APPLICATION FOR HOME OCCUPATION PERMIT

Name of Applicant: \_\_\_\_\_

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

OK Sales Tax Permit #: \_\_\_\_\_ (Attach copy)

Home Occupation physical address: \_\_\_\_\_

Dewey/Major County Tax Roll Property ID Number (or Legal Description):  
\_\_\_\_\_

Please answer all questions completely. Use additional page if necessary.

1. State, in detail, the type of business and how it will be operated. \_\_\_\_\_  
\_\_\_\_\_
2. Will Customers come to the home?  Yes  No  
If so, how many/often? \_\_\_\_\_
3. Will any materials/products be sold/picked up from the home?  Yes  No  
If yes, please explain. \_\_\_\_\_
4. Will materials/products used in the home occupation be delivered to the home?  Yes  No  
If Yes, how often? \_\_\_\_\_
5. Will the home occupation result in any increase in glare, dust, electrical interference, smoke or odor?  Yes  No
6. Will the home occupation be conducted entirely within the home?  Yes  No  
If not conducted in the home only, please explain. \_\_\_\_\_
7. What percent of the floor area of the home will be used in the home occupation? (Square feet of area to be used by the home occupation divided by the **total** square feet of all buildings being utilized by home occupation.) \_\_\_\_\_
8. Will there be any external evidence of a home occupation such as vehicles, equipment, or materials parked or stored outside?  Yes  No  
If yes, please explain. \_\_\_\_\_
9. Will people living outside the home will be employed in the home occupation?  Yes  No  
If yes, please identify.

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

10. How many off-street parking spaces can be provided? \_\_\_\_\_

11. Will there be a sign on the premises advertising the home occupation?  Yes  No  
If yes: Proposed location? \_\_\_\_\_  
Please note: Signs larger than 144 square inches (i.e. 12" x 12") are not allowed.

12. Will the dwelling be occupied by Applicant as a residence?  Yes  No

I have read the Town of Seiling Code Title 11, Chapter 4, Sections 1 and 2, related to Home Occupations and understand my home occupation must comply with the requirements therein. I understand that a fee of \$10 must be submitted with this completed application, and that failure to submit the application and required fee will result in the delay of my application being presented to the Planning and Zoning/Town Board for consideration. A copy of my Oklahoma Sales Tax Permit is enclosed with this application.

If my home occupation ceases operations, I will notify the Town Clerk of the last day of operations and any sign posted, and/or any product for, or outside evidence of the home occupation will be removed.

The information provided above is true to the best of my knowledge.

Signature: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

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

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Approved / Denied      Dated: \_\_\_\_\_

Signature: \_\_\_\_\_  
Mayor, Town of Seiling

Attest: \_\_\_\_\_  
Town Clerk, Town of Seiling