

DT# e. Only my family, who actually resides at the home with me, I engage in the home occupation. I will not have any employee(s) come to my home. I will not have any customers coming to my home, unless specifically authorized by the Planning Director.

~~DT#~~ f. I will limit all storage of materials or products to 20% of gross floor area of the dwelling. All storage will be inside a building.

DT# g. I will conduct the home occupation inside a building. (A carpet or patio sunshade is not inside a building).

DT# h. If I use any of the garage area for the home occupation, I will only use an area that does not reduce parking area for the cars.

DT# i. I agree that the home occupation shall not cause any external effect associated with the home occupation such as increased noise, excessive traffic, excessive lighting, or offensive odor which is incompatible with a residential zone, or in violation of the provisions of any applicable government code. There shall be no illegal discharge of any materials, fluids, or gases into the sewer system of discharged in violation of any applicable government code.

DT# j. I will obtain a parish Occupational License and a Health Certificate from the Parish Health Department when required.

DT# k. I will provide a copy of the parish Occupational License that I obtain for the business to the Department of Planning & Zoning upon its issuance and upon renewal of that license annually. I will provide a copy to the Department of Planning & Zoning within ten (10) days of the effective date of renewal.

DT# l. I agree that the Planning Department, Fire Department or Louisiana State Fire Marshall and Health Department may inspect my premises at any time.

DT# m. I understand that failure to abide by the twelve statements above will cause the Home Occupation Permit to be revoked.

DT# n. I will further read and agree to abide by St. Charles Parish Ordinance regulating home occupations, as well as any special provisions required by the Planning Director.

DT# o. Pay permit fee of \$100 upon application for a home occupation.
(Make checks payable to St. Charles Parish Finance Department)

I HAVE READ AND RECEIVED A COPY OF THE HOME OCCUPATION ORDINANCE, AND I ACKNOWLEDGE THAT I WILL COMPLY WITH ITS CONDITIONS AND WITH ANY SPECIAL PROVISIONS IMPOSED BY THE PLANNING DIRECTOR. I FURTHER ACKNOWLEDGE THAT ANY VIOLATION OF THE ORDINANCE OR SPECIAL PROVISIONS CONSTITUTES AN EXPRESSED SURRENDER AND ABANDONMENT OF THE HOME OCCUPATION PERMIT.

APPLICANT SIGNATURE: Dorett Vignone Sr DATE: 2-22-08

(IF THE APPLICANT HEREIN IS NOT THE PROPERTY OWNER, WRITTEN CONSENT OF OWNER TO OBTAIN THE HOME OCCUPATION PERMIT MUST ACCOMPANY THIS APPLICATION) SPECIAL PROVISIONS:

Application is approved/disapproved on this date: _____

PLANNING DIRECTOR

2006-24