

THE BOROUGH OF BEAVER

Application For HOME OCCUPATION PERMIT

469 Third Street, Beaver, PA 15009

www.beaverpa.us

Phone: 724-773-6700 Fax: 724-773-6711

beaverborough@comcast.net



Today's date: _____ Zoning District: _____ Tax Parcel #: _____

Property address: _____

Property owner name: _____ Phone: _____

Business Name: _____ Email: _____

Business Phone: _____ Business Email: _____

Number of employees: _____ (all employees must be family members of the property)

Name(s) of employees: _____

Description of home business: _____

Permit Fee: \$ _____ - PERMIT FEE IS NON-REFUNDABLE

Home Occupation

Any activity carried out for monetary gain conducted as an incidental and accessory use by the resident of a dwelling unit (see § 27-1515).

Home - Based Business

A business or commercial activity administered or conducted as an accessory use which is clearly secondary to the use as a residential dwelling and which involves no customer client or patient traffic, whether vehicular or pedestrian, pickup, delivery or removal functions to or from the premises, in excess of those normally associated with residential use.

(office use only)

Zoning Officer Signature Approved Denied Date: _____

Reason for Denial: _____

Approval is subject to the conditions noted: _____

