

Date Received  
Date of Hearing  
Permit: Approved \_\_\_\_\_  
Denied \_\_\_\_\_

**TOWN OF ORONO  
APPLICATION FOR A HOME OCCUPATION PERMIT**

Applicant: \_\_\_\_\_

Address of Property: \_\_\_\_\_

Number of Employees: \_\_\_\_\_

Describe what the planned Home Occupation is: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe any proposed changes in the property to accommodate the Home Occupation. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe any proposed sign and any other advertising. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Describe any existing or proposed off street parking. \_\_\_\_\_

\_\_\_\_\_

Describe any vehicles that will be used for the Home Occupation. \_\_\_\_\_

\_\_\_\_\_

I have received a copy of the Orono Home Occupation Ordinance.

Please provide a sketch of your property location showing parking, driveways and access to the street on the back of this application.

\_\_\_\_\_  
Signature of Applicant