



CITY OF LOS ALAMITOS HOME OCCUPATION APPLICATION

Development Services Department
3191 Katella Ave., Los Alamitos, CA 90720-5600
Phone: (562) 431-3538 Fax: (562) 493-0678

FOR OFFICE USE ONLY	
Application #:	_____
Received:	_____
Filing Fee:	\$111.00
DATE:	_____
<input type="checkbox"/>	APPROVED
<input type="checkbox"/>	DENIED

APPLICANT INFORMATION

Applicant Name: _____
Home Occupation Address: _____
Applicant Phone: _____ Email: _____

PROPERTY OWNER INFORMATION

Name of Property Owner: _____
Property Owner Address: _____
Property Owner Phone: _____

HOME OCCUPATION BUSINESS INFORMATION

Provide a detailed description of the proposed Home Occupation relative to (a) activities involved, (b) materials and equipment used, and (c) methods of operation. (Attach a separate sheet if necessary.)

How many persons will be involved or employed in the conduct of the proposed Home Occupation?

Total number: _____ Members of immediate family: _____ Others: _____

Describe any alterations to the home or premises that might be required to facilitate your Home Occupation.

Describe what rooms will be used in the conduct of the Home Occupation and how these rooms will be used. (For example; "The den will contain a desk and file cabinets", etc.)

Describe mechanical and/or electrical equipment that will be necessary to the conduct of the activity.

Describe what small amount of material, supplies and/or equipment related to your proposed Home Occupation will be used.

CERTIFICATION OF APPLICANT: I have read and understood Chapter 17.46 of the Los Alamitos Municipal Code regarding criteria for issuance of a Home Occupation Permit and believe to the best of my knowledge that my proposed Home Occupation would not violate any portion of said Chapter.

Applicant's Signature: _____ Date: _____

Property Owner's Signature: _____ Date: _____

FOR OFFICE USE ONLY

Date Reviewed: _____

Remarks: _____
