

County of Caroline
Department of Planning
& Community Development
233 West Broaddus Street
P.O. Box 424
Bowling Green, Virginia 22427
(804) 633-1766 Fax
(804) 633-4303
Webpage: www.visitcaroline.com



MEMORANDUM

TO: Home Occupation Applicants

FROM: Department of Planning & Community Development

RE: Home Occupation Standards

Home occupation standards are intended to ensure compatibility with other permitted uses and with the character of the neighborhood. **If you as a business owner are required to obtain a business license from the County Commissioner's Office and you are a resident of Caroline County, and the business address is the same as your home address, then a home occupation permit is required.** This is a zoning permit which allows your business operation to comply with the County's Zoning Ordinance. The following standards apply to **ALL** Home Occupations:

General Standards

1. There shall be no change in the outside appearance of the buildings or premises, or other visible evidence of the conduct of the home occupation.
2. There shall be only one sign permitted which shall be no larger than four (4) square feet.
3. The home occupation shall not create any noise, dust, vibration, smell, smoke, glare, electrical interference, fire hazard, or any other hazard or nuisance.
4. All supplies and equipment associated with the home occupation shall be stored within the dwelling or accessory building.
5. Clients of the home occupation may be seen on an appointment only basis (example: one chair beauty shop).
6. None of the employees, other than members of the immediate family residing on the premises, shall report to the premises for work.

In addition to the General Standards above, **Minor Home Occupations** must abide by the following standards:

1. Home occupations shall be conducted within the dwelling and/or an accessory structure provided the home occupation shall not exceed thirty-five percent (35%) of the gross floor area of the dwelling unit or two thousand square feet, whichever is less.
2. Home occupations shall be conducted within the dwelling and/or an accessory structure provided the home occupation shall not exceed twenty-five percent (25%) of the gross floor area of the dwelling unit.
3. There shall be no one other than members of the immediate family residing on the premises involved in conduct of the home occupation (no outside employees).
4. There shall be no major internal alterations required for the conduct of the home occupation.
5. No commodity shall be stored or sold, except such as are made/fabricated/assembled on the premises.
6. There shall be no group instruction, assembly, activity.
7. Internet sales/consulting is permitted provided that all sales are conducted off-site and/or drop shipped to the purchaser of the product.

ADDITIONALLY FOR ANY BUSINESS SELLING FOOD PRODUCTS:

It shall be the responsibility of the applicant to obtain any necessary and/or required approvals from the Caroline County Health Department and/or the Virginia Department of Agriculture when the home occupation involves the sale and/or preparation of food and/or food services. Virginia food law requires inspections **BEFORE** the preparation or sale of food or food services. The Caroline Health Department can be reached at 804/633-5465 and the Virginia Department of Agriculture can be reached at 804/786-3520 or 757/363-3909.

TO BE SIGNED BY APPLICANT:

I have read and understand these use limitations regarding my home occupation application/permit.

Signed: _____ Date: _____

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(804) 633-4306 Main
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Home Occupation Permit Application

Part I. Property Owner Information:

Name:	_____
Address:	_____
Mailing Address:	_____
City/:	_____ State: _____ Zip: _____
Daytime Telephone No.:	_____ Fax Number: _____
E-mail Address:	_____

Part II. Applicant Information (if applicant is owner go to Part III):

Name:	_____
Address:	_____
Mailing Address:	_____
City/:	_____ State: _____ Zip: _____
Daytime Telephone No.:	_____ Fax Number: _____
E-mail Address:	_____

Part III. Property Information:

Tax Map/Parcel Number:	_____
Zoning:	_____ Parcel Size (acres or square feet) _____
Subdivision Name (if any):	_____

Part IV. Home Occupation Information:

Type of Business:	_____
Name of Business:	_____

Supplemental Information

1. Please provide a detailed description of the proposed Home Occupation such as: (a) activities involved (b) materials and equipment used and (c) methods of operation.

2. How many persons will be involved or employed in the conduct of the proposed operation (include yourself)

Immediate Family Members: _____
Others: _____
Total: _____

3. Will anyone report to your home for work, to get supplies or to utilize any service?

Yes No

4. What type of product will be produced, serviced, or repaired in the conduct of your Home Occupation? Explain:

5. Describe any type of alterations to the home or premises that may be required to facilitate your Home Occupation.

6. Explain which rooms will be used in the conduct of the Home Occupation and how these rooms will be used (include the total square footage used).

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

8. Describe how, where and in what amounts the material, supplies, and/or equipment related to your proposed home occupation will be displayed or stored.

9. Are there any signs necessary or proposed relative to the Home Occupation?

Yes No

If yes, describe type, size and location.

10. If trucks or other equipment will be used in your Home Occupation, where will they be parked or stored?

11. Will the Home Occupation involve the use of commercial vehicles?

Yes No

If yes please explain:

12. Will the Home Occupation involve the use of commercial vehicles for delivery of materials to the premises?

Yes No

If yes please explain:

13. Is your proposed Home Occupation in conformance with the covenants and restrictions pertaining to your property?

Yes No

I hereby certify that I have the authority to make the foregoing application and that all information provided is true and accurate. Failure to provide true and accurate information shall automatically render this permit invalid. I further certify that I have read and understand the standards for Home Occupations attached to this application. I authorize any County, State and/or federal representative(s) to enter my property in respect to the processing and review of this permit if necessary.

Property Signature(s): _____

Date: _____

Property Signature(s): _____

Date: _____

If applicant is not property owner:

Applicant's Signature(s): _____

Date: _____

Applicant's Signature(s): _____

Date: _____

County Review & Approval

Approved

Disapproved

Conditions: _____

Signature: _____ Date: _____

Planning & Zoning Administrator