



Date Submitted _____
 Date Approved _____
 License # _____
 Period _____

CITY OF PARKVILLE • 8880 Clark Avenue • Parkville, MO 64152 • (816) 741-7676 • FAX (816) 741-0013

Home Occupation Compliance Affidavit
1. Business description

Describe the home occupation including type of business & hours *(may be attached)*: _____

Describe the vehicular and pedestrian traffic that will be generated *(may be attached)*: _____

2. Affidavit of Compliance

The Parkville Municipal Code restricts home occupations to “Any occupation or activity which is clearly incidental and secondary to use of the premises for dwelling and which is carried on wholly within a main building by a member of a family residing on the premises in connection with which there is no advertising, and no display or storage of materials or generation of substantial volumes of vehicular or pedestrian traffic or parking demand or other exterior indication of the home occupation or variation from the residential character of the building; and in connection with which no person outside the resident family is employed and no equipment used which creates offensive noise, vibration, smoke, dust, odors, heat or glare.”

I, the business owner, certify by my signature below that the proposed home base business is in full compliance with these restrictions and complies with all the statements checked below.

- The home occupation is one of the following: an art studio; for dress-making; a professional office of a physician, dentist, lawyer, engineer, architect, accountant, salesman, real estate agent, insurance agent, or other similar occupation; for teaching, with musical instruction limited to one or two pupils at a time; for the keeping, boarding or caring for more than two children unrelated to the occupant for monetary or valuable considerations for which a Conditional Use Permit has been granted.
- The home occupation is not a barbershop, beauty parlor or restaurants.
- I reside at the above address and all employees are family members who also reside at this address.
- I am the property owner or have obtained the approval of the property as attested by signature below.
- I am compliant with applicable homeowners’ association regulations or covenants and restrictions as applicable. If approval is required, I have attached proof of such.
- The home occupation will be carried on entirely within the main building and will be free of outside indications of the occupation including being free of: advertising and signage; materials, vehicle and equipment storage; frequent loading, delivery or pick-up; and all similar indications.
- All vehicles to be used for the home occupation are registered to the home address and will be free from advertising, or parked in a garage or on an approved parking surface not visible to the public.
- The home occupation will be free from any noise, vibration, smoke, dust, odors, heat, glare, or other offense to abutting property owners.
- The home occupation does not require any alterations to the home, or I have obtained all required permits for alterations and have received a certificate of occupancy following completion of such.

3. Acknowledgements and authorization signatures *(both signatures required)*

I, the undersigned, do hereby authorize the submittal of this application and certify and affirm that all information I have provided herein is true and correct. I hereby agree to abide by and comply with all applicable Parkville Municipal Codes and conditions of approval. I further understand that any violations of said codes or conditions of approval shall be cause for the retraction of this permit, and enforcement and penalties as prescribed by the Parkville Municipal Code shall apply. I understand that this application is non-transferable, must be renewed annually, and that if my home occupation changes, I must submit a new application for approval.

Business owner (printed name) _____ Title: _____

Signature _____ Date: _____

Property owner (printed name) _____ Title: _____

Signature _____ Date: _____