

City of South Beloit

APPLICATION FOR REGISTRATION OF A HOME OCCUPATION

*The applicant must provide a copy of any State Licenses (if applicable)

1. Property Location: _____ South Beloit, IL _____
2. Name of Applicant: _____ Phone #: _____
3. Mailing Address: _____
4. Type of Occupation, intended use and hours of operation: _____
5. List of mechanical (heating/cooling) and/or electrical equipment to be used: _____

6. Location within the dwelling unit for home occupational use: _____

7. Method of Operation: _____

(by appointment only, walk-in, etc.)

Signature of applicant: _____

Date: _____



Approval by Zoning Staff: _____	Interior Site Plan <input type="checkbox"/>
Zoning District: _____	
Date: _____	