

Cornwallis Hills Home-Based Business Application and Registration Form

Owner's Name(s) (print): _____

Address of home-based business: _____

Mailing Address, if different: _____

Telephone (home): _____

Telephone (cell): _____

Telephone (business): _____

Name of Business, if applicable: _____

Type of Business: _____

Description of Business Activities: _____

Please answer the following questions in order to assess the impact of the home-based business on your neighbors. (Place an X in front of your answer)

1. Re: Impact on neighbors' quiet use and enjoyment of property: Will home-based business be conducted indoors, outdoors, or both?

_____ Indoors only

_____ Outdoors only

_____ Both indoors and outdoors

2. Re: Impact on neighborhood traffic: Other than for deliveries, how many vehicles/customers/employees in total will visit your home for business purposes on a daily basis (even if just for a few moments)?

_____ No daily visitors expected

_____ 1 visitor per day

_____ 2 to 4 visitors per day

_____ More than 4 visitors per day

3. How many truck/deliveries will be made to your home for business purposes on a weekly basis?

_____ NONE

_____ 1 per week

_____ 2 to 5 per week

_____ More than 5 per week

I agree to conduct my home-based business in compliance with the home-based business policy and the Declaration of Covenants, Conditions, and Restrictions of Cornwallis Hills Subdivision. I understand that failure to comply may result in a cancellation of approval of this application.

Home-Based Business Owner's Signature: _____ **Date:** _____

(Only if home-based business owner is tenant, property owner must also sign application)

I agree to be financially responsible for paying any unpaid fines that may be incurred by this tenant for failure to keep this home-based business in compliance with the home-based business policy and the Declaration of Covenants, Conditions, and Restrictions of Cornwallis Hills Subdivision.

Property Owner's Signature: _____ **Date:** _____

(For Cornwallis Hills Board of Directors' Use Only)

Date Completed and Executed Application Received: _____
Date Reviewed: _____
Reviewed by (please print): _____
Decision: (put an X in front of decision)
<input type="checkbox"/> Approved <input type="checkbox"/> Denied
If denied, reason: _____
Signature of Reviewer: _____ Date: _____
Title: _____
Date registration form with decision mailed to home-based business owner: _____
(If rental)
Date copy of this application and decision mailed to property owner: _____