

**UPPER PROVIDENCE TOWNSHIP
HOME OCCUPATION REGISTRATION FORM**

Street Address _____ Date _____

Property Owner Name _____ Telephone # _____

Business Name: _____ Telephone # _____

Present Zoning Classification: _____

Please select one of the following:

Accessory Home Occupation _____

Nonresidential Accessory Use _____

Family Day Care _____

Full Description of proposed occupation (include sketch of floor plan):

Total Floor area of Dwelling Unit: _____ Area used for home occupation _____

I hereby certify that the statements contained herein are true to the best of my knowledge and belief

Applicant signature _____ Date: _____

**** You will be contacted when your permit is ready.**

OFFICE USE ONLY			
Application Date _____	Fee Paid _____	Check # _____	Rec'd by: _____
Permit # _____	Date issued: _____	Rec'd from: _____	