



**APPLICATION / RENEWAL FORM FOR PERMIT TO
CARRY ON A HOME OCCUPATION/INDUSTRY**

OWNER

FULL NAME OF APPLICANT: _____

FULL ADDRESS: _____

OCCUPIER

FULL NAME OF APPLICANT: _____

FULL ADDRESS: _____

DESCRIPTION OF LAND

HOUSE NUMBER: _____ STREET _____

LOCALITY _____ LOT NUMBER _____

NATURE OF PROPOSED HOME OCCUPATION/INDUSTRY _____

AREA OF LAND/BUILDING TO BE USED FOR HOME OCCUPATION _____

PARTICULARS OF PERSONS TO BE EMPLOYED (STATE NUMBER OF PERSONS AND RELATIONSHIP TO EMPLOYER) _____

DESCRIPTION OF EQUIPMENT OR MACHINERY TO BE USED: _____

DESCRIPTION OF STORAGE AREAS _____

NUMBER OF VEHICLES FOR PARKING TO BE PROVIDED: _____

FREQUENCY OF COLLECTION AND DELIVERY OF GOODS: _____

HOURS OF OPERATION _____

SIGNATURE OF OWNER: _____

SIGNATURE OF APPLICANT OF AGENT: _____
(Both signatures are required if applicant is not the owner)

DATE _____

The occupier named above hereby applies for the Permit/renewal of a Permit in respect of the Home Occupation/Industry described above and states that the above particulars are true.