

**APPLICATION FOR HOME OCCUPATION**

Borough Of West Mifflin

1020 Lebanon Road

West Mifflin, PA 15122

T:(412) 466-8174 F:(412) 466-8173

westmifflinborough.com

CO #

Type of Use: HO

Type of Review: F Occupancy/Use:  
CHG

**I (We) hereby make application for a home occupation permit:**

**Property Address:**

**Applicant(s) Name & Address:**

**City**

**Zip**

**Home Phone:**

**Business Phone:**

**Cell Phone:**

*If Applicant is other than Owner, specify relationship (i.e. tenant, relative) and have Owner complete Owner's Statement below.*

**Relationship:**

**Owner(s) Name & Address:**

**City**

**Zip**

**Home Phone:**

**Business Phone:**

**Cell Phone:**

**Current and/or Former Use of Property:**

**PLEASE PROVIDE A BRIEF DESCRIPTION OF HOME OCCUPATION:**

**Fee: \$75.00**

**Cash Rec. No. or**

**Check No. & Bank Name:**

**APPLICANT'S STATEMENT**

*I have read and understand the Borough's Home Occupation Standards as set forth in Chapter 7 of the Borough Code and agree to conduct home occupation activities in strict accordance with said provisions.*

I hereby state that I am a Resident(s) of the above-described property, and that all of the statements contained above are true and correct.

Resident's Signature

Date

**OWNER'S STATEMENT**

I hereby state that I am the Owner of the above-described property, and that I have no objection to the filing of this application for home occupation and conduction of said home occupation, subject to approval by the Borough of West Mifflin.

Signature \_\_\_\_\_ DATE \_\_\_\_\_