

CITY OF NORFOLK

HOME OCCUPATION REGISTRATION FORM

Please review [City Code Section 27-289. Home Occupations](#) prior to completing this form. If you have questions, please call the Fire Division's Prevention Bureau at (402) 844-2060.

DATE _____ NAME _____

STREET ADDRESS _____ PHONE _____

MAILING ADDRESS _____

CITY/STATE/ZIP CODE _____

NAME OF BUSINESS _____

NATURE OF HOME OCCUPATION (give brief description) _____

DATE HOME OCCUPATION BEGAN _____

SQUARE FEET OF HOUSE _____

SQUARE FEET USED FOR HOME OCCUPATION _____

IS A SIGN POSTED FOR HOME OCCUPATION? _____

(If yes, state size of sign) _____

DO YOU EMPLOY A NON-RESIDENT EMPLOYEE? _____

(If yes, attach a certificate as per Section 27-289(C)(8) of the Zoning Regulations of the City of Norfolk.)

SIGNATURE _____

OFFICIAL USE ONLY

DATE RECEIVED _____ RECEIVED BY _____

INSPECTION REQUIRED _____ DATE INSPECTED _____