



# CITY OF HIGHLAND

## HOME OCCUPATION BUSINESS LICENSE APPLICATION

In order to avoid a delay in processing your application, please provide **all applicable** information, and type or print clearly.

### HOME OCCUPATION LICENSE

**FEE: \$124.00**

(Includes \$4 AB1379 Fee)

\_\_\_\_ Fictitious Business Name      \_\_\_\_\_ Seller's Permit      \_\_\_\_\_ WDID Receipt Letter  
\_\_\_\_ Health Permit      \_\_\_\_\_ Other Lic: \_\_\_\_\_

Business Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Business Phone: ( ) \_\_\_\_\_  
Fax number: ( ) \_\_\_\_\_

#### Mailing address:

Mailing Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Sole Proprietor      \_\_\_\_\_ Partnership      \_\_\_\_\_ Corp  
   \_\_\_\_\_ LLC      \_\_\_\_\_ Charitable      \_\_\_\_\_ Other

Honorably Discharged Veteran selling tangible goods?      \_\_\_\_\_ Yes      \_\_\_\_\_ No  
Is this business "Not For Profit"?      \_\_\_\_\_ Yes      \_\_\_\_\_ No  
Will the business operations include any waste, waste water, or  
rinse water to the ground, street, or storm drain?      \_\_\_\_\_ Yes      \_\_\_\_\_ No

Describe type of business being conducted: \_\_\_\_\_

Identify SIC Code\*: \_\_\_\_\_

SIC Description: \_\_\_\_\_

\*Standard Industrial Classification (SIC) Code information can be found at <https://www.osha.gov/pls/imis/sicsearch.html>

### Owner or Principal Officer(s):

HMC.5.12.020(A)- Only persons residing on the premises shall be involved in any such business with no outside employees or contract labor employed on a regular basis.

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Title: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone # \_\_\_\_\_ Phone # \_\_\_\_\_  
Driver's License # \_\_\_\_\_ Driver's License # \_\_\_\_\_  
Social Security # \_\_\_\_\_ Social Security # \_\_\_\_\_

#### \*Provide a copy of all permits

Federal Tax ID/SS#: \_\_\_\_\_ Contractor License: \_\_\_\_\_  
Resale Permit #: \_\_\_\_\_ Class/Expiration: \_\_\_\_\_  
Other License/Permit: \_\_\_\_\_ Health Permit #: \_\_\_\_\_  
NPDES WDID #: \_\_\_\_\_

I declare, under penalties of Perjury, by signing as (one of) the owner(s)/Principal Officer(s) listed below, that this application, including attachments, have been examined by me, as well as the property owner(s), and to the best of my knowledge believe to be true, accurate and complete of all facts. I further certify that the above business will be conducted in compliance with the applicable provisions of The City of Highland Municipal Codes & Ordinances, including State and Federal laws. In addition, I assume responsibility to renew this business license on an annual basis and pay the renewal fees on time. I understand that I will be subject to late fees, additional administrative charges, and/or have the business license revoked due to non-compliance of the conditions set forth by the City of Highland. I also agree to notify the City of Highland of any and all changes in business status relating to this application. As a courtesy, the City will send you a renewal notice. If you do not receive the notice, it is your responsibility to pay by the due date to avoid penalties. The applicant has up to 90 days to comply with the application process and the renewal process. If you do not meet this time period, your business license will be closed. You may reapply and pay all associated fees.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### OFFICE USE ONLY

( ) X \_\_\_\_\_ X \_\_\_\_\_  
Zoning      Planning Approval      Date      Code Enforcement Approval      Date

X \_\_\_\_\_  
Public Services Approval      Date

# ATTACHMENT A: HOME OCCUPATION REGULATIONS

In order to avoid a delay in processing your application, please provide **ALL APPLICABLE** information, and type or print clearly. Thank You.

## 5.12.010 Definitions.

As used in this chapter:

“Home occupation” means any occupation customarily conducted entirely within a dwelling by its inhabitants, the purpose being incidental to the use of the dwelling for dwelling purposes and provided that no article is sold or offered for sale other than personal and home care products and small crafts.

“Reviewing authority” means that person who is designated by the city manager to oversee the issuance of home occupation permits. (Ord. 56 § 1, 1989)

## 5.12.020 Intent and regulations.

Home occupations are intended to provide for commercial uses associated with a residence in those cases where that use will clearly not alter the character nor the appearance of the residential environment. Home occupations, as defined, shall be permitted in any residential zone or land use district, subject to the following regulations:

A. Only persons residing on the premises shall be involved in any such business with no outside employees or contract labor employed on a regular basis;

B. There shall be no direct sales of products or merchandise other than personal and home care type products and small crafts;

C. Pedestrian and vehicular traffic will be limited to that normally associated with residential districts;

D. The home occupation shall not involve the use of commercial vehicles for the delivery of materials to or from the premises beyond those commercial vehicles normally associated with residential uses;

E. Up to 25 percent (no more than 250 square feet) of the living space within the home may be used for storage of materials and supplies related to the home occupation;

F. There shall be no outdoor storage of materials or equipment, nor shall merchandise be visible from outside the home;

G. The home occupation shall be confined within the main building. A detached garage shall be considered as a part of the main building. In no manner shall a required garage area be utilized for business purposes;

H. The appearance of the structure shall not be altered nor the occupation within the residence be conducted in a manner that would cause the premises to differ from its residential character either by the use of colors, materials, construction, lighting, signs, or the emission of sounds, noises, and vibrations;

I. The use of utilities and/or community facilities shall be limited to that normally associated with the use of the property for residential purposes;

J. There shall be no advertising of the location address in a public forum (newspapers, telephone books, etc.) regarding the commercial use which is the subject of a home occupation permit. (P.O. box and telephone number may be advertised.);

K. There shall be no storage or use of chemicals, solvents, mixtures or materials which are corrosive, toxic, flammable, an irritant, a strong sensitized, or other similar materials used in home occupations without the written approval of the appropriate licensing authority(ies). (Ord. 56 § 2, 1989)

## HOME OCCUPATION ADDENDUM TO BUSINESS LICENSE APPLICATION

Square Footage of Residence \_\_\_\_\_ plus Garage \_\_\_\_\_ Total Combined Square Footage \_\_\_\_\_

Total Square Footage of Work Area \_\_\_\_\_ Room Devoted to Occupation \_\_\_\_\_

Type of Mechanical Devices for Occupation \_\_\_\_\_

Total Square Footage of Storage Area \_\_\_\_\_ Room Devoted for Storage \_\_\_\_\_

Type & Quantity of Supplies or Materials in Storage Area \_\_\_\_\_

Type of Advertising \_\_\_\_\_ Approx. Number of Visitors to Residence Per Day \_\_\_\_\_

Where will Service/Product Be Sold? \_\_\_\_\_

Will commercial vehicles which do not exceed the ½ ton rate of capacity be used for delivery of materials to/from the residence? \_\_\_\_\_

If utilizing trucks or other equipment, where will they be parked or stored? \_\_\_\_\_

(Please call the **Planning Department at x258** if you have any questions regarding this section.)

## APPLICANT SIGNATURE

I declare, under penalties of Perjury, by signing as (one of) the Owner(s)/Principal Officer(s) listed below, that this Attachment A to the business license application has been examined by me, and to the best of my knowledge is true, accurate, and complete of all facts. In addition, I have read the notice regarding Home Occupation Regulations and will abide by them as stated herein.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**ATTACHMENT C: PROPERTY OWNER'S DECLARATION**

*In order to avoid a delay in processing your application, please provide ALL APPLICABLE information, and type or print clearly. Thank You.*

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I declare, under penalties of perjury, by signing as (one of) the property owner(s) listed below, I hereby authorize

Name(s) of business owner(s)/principal officer(s): \_\_\_\_\_

Name of business and/or DBA: \_\_\_\_\_

to use my property located at: \_\_\_\_\_  
(business address)

in order to conduct a business for the purpose of \_\_\_\_\_  
(type of business)

In compliance with the applicable provisions of the City of Highland Municipal Code & ordinances, as well as both State and Federal laws.

Property owner's name: \_\_\_\_\_

Property owner's address: \_\_\_\_\_

\_\_\_\_\_

Property owner's phone: (      ) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**APPLICANT SIGNATURE**

I declare, under penalties of perjury, by signing as (one of) the owner(s) listed below, that this Attachment B to the business license application has been examined by me, and to the best of my knowledge is true, accurate, and complete of all facts.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you have any questions please feel free to call the business license department (909) 864-6861 x 225

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*OFFICE USE ONLY*

Residential Rental License Required?    Yes            No

Current Residential Rental License #: \_\_\_\_\_

# ATTACHMENT B: COTTAGE FOOD OPERATIONS REGULATIONS

*In order to avoid a delay in processing your application, please provide ALL APPLICABLE information, and type or print clearly. Thank You.*

Definition. 'Cottage Food Operation' means an enterprise that is operated by a cottage food operator in a private residence and has not more than one employee, not including a family member or household member(s) of the cottage food operator, where cottage food products are prepared or packaged for direct or indirect sale to consumers.

Performance and Development Standards. Cottage food operations shall be permitted in any private residence subject to compliance with the following conditions:

- a. No cottage food operations shall be allowed to operate without first securing all required permits and approvals from the San Bernardino County Department of Public Health and the City.
- b. Not more than one employee, paid or voluntary, not including an immediate family member or resident of the household of the cottage food operator, shall be employed by the cottage food operation.
- c. Sales performed from the private residence shall be allowed subject to the following conditions:
  - i. No outdoor sales shall be permitted on the premises.
  - ii. Customer vehicles shall not impede vehicular or pedestrian traffic, block a driveway or sidewalk, or sit idling at any time.
  - iii. No on-site dining or loitering shall be permitted.
- d. Delivery and loading shall be subject to following conditions:
  - i. Deliveries and loading shall be limited to Monday through Friday between the hours of seven (7) a.m. to eight (8) p.m. No deliveries or loading shall be permitted on Saturday or Sunday.
  - ii. Delivery and loading vehicles or pedestrian traffic, block a driveway or sidewalk, block or occupy areas designated for emergency apparatus or sit idling at any time.
  - iii. Cottage food operations participating in indirect sales to third-party retailers shall not use third-party delivery services to deliver food products to the retailer.
  - iv. Delivery and loading vehicles shall not occupy or block access to required parking for the private residence.
- e. Not more than two (2) rooms within the private residence, one (1) of which shall be the kitchen, that have been registered or permitted with the San Bernardino County Department of Public Health shall be utilized for the food cottage operation, inclusive of an attached or detached enclosed garage. No outdoor space shall be used for cottage food operation purposes.
- f. A maximum of 250 square feet or 25 percent of the private residence, whichever is greater, shall be utilized for storage of materials, supplies for equipment related to the cottage food operation.
- g. There shall be no outdoor storage or visible storage of materials, supplies or equipment.
- h. In no way shall the appearance of any private residence or the conduct of the cottage food operation within the private residence be such that any portion of the premises may be reasonably recognized as serving a nonresidential use, either by color, form, materials of construction, lighting, signs, sounds, noises, odors, vibrations or other means.
- i. The cottage food operator is not the homeowner of the private residence in which the cottage food operation will be conducted, written authorization from the property owner shall be provided.

## **COTTAGE FOOD OPERATIONS ADDENDUM TO BUSINESS LICENSE APPLICATION**

Square Footage of Residence \_\_\_\_\_ plus Garage \_\_\_\_\_ Total Combined Square Footage \_\_\_\_\_

Total Square Footage of Work Area \_\_\_\_\_ Room Devoted to Occupation \_\_\_\_\_

Type of Mechanical Devices for Occupation \_\_\_\_\_

Total Square Footage of Storage Area \_\_\_\_\_ Room Devoted for Storage \_\_\_\_\_

Type & Quantity of Supplies or Materials in Storage Area \_\_\_\_\_

Where will Service/Products Be Sold? \_\_\_\_\_

Will commercial vehicles which do not exceed the 1/2 ton rate of capacity be used for delivery of materials to/from the residence? \_\_\_\_\_

If utilizing trucks or other equipment, where will they be parked or stored? \_\_\_\_\_

(Please call the Planning Department at **x258** if you have any questions regarding this section.)

**AB1379** \*Under federal and state law, compliance with disability access laws is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies: The Division of the State of Architect at [www.dgs.ca.gov/dsa/Home.aspx](http://www.dgs.ca.gov/dsa/Home.aspx). The Department of Rehabilitation at [www.rehab.cahwnet.gov](http://www.rehab.cahwnet.gov). The California Commission on Disability Access at [www.cdda.ca.gov](http://www.cdda.ca.gov).