



**AFFIDAVIT FOR OPERATION OF
QUALIFIED HOME OCCUPATION
City of Saraland, Alabama
CONDITIONS OF COMPLIANCE**

By my signature below, I certify that I will operate my Qualified Home Occupation at my home address, which is located at _____

(street address)

in accordance with the foregoing conditions. I understand that violation of any of the conditions will subject my Privilege License to being revoked.

- 1) The privilege license is valid only for this home occupation, this operator at this location;
- 2) This home occupation approval is void if the license is allowed to lapse;
- 3) Any work conducted in the home (i.e. bookkeeping, etc.) is confined entirely to the principal building, accessory building, or outside storage building;
- 4) No more than twenty (20) percent of gross floor area is used for the business;
- 5) No more than two residents of the home will engage in business activity at the home;
- 6) No employees or employee vehicles are allowed at the home;
- 7) There are no customers at the home;
- 8) Any business-related equipment or materials are kept inside the home;
- 9) All commercial vehicles associated with the home occupation shall be parked on private property, outside of the City right-of-way;
- 10) If business-related materials or equipment are delivered to the home, there will be no more than two (2) deliveries per week and the delivery vehicle shall have no more than a single axle with six (6) wheels;
- 11) The business owner is responsible for observing any private covenants which may impact the home occupation;
- 12) Any other restriction as may be considered appropriate by the administrative official or the board of adjustment; and
- 13) Violation of any of the aforementioned conditions and section 31-1 of the City of Saraland Land Use and Development Ordinance 757, could result in revocation of the approval.

Printed Name

Signature

****THIS AREA TO BE COMPLETED BY PLANNING & DEVELOPMENT STAFF****

Alabama Driver's License I.D. Number: _____

Expiration Date: _____

Subscribed and Sworn to before me the _____ day of _____ 20 ____.

Planning & Development Department Official