



## Home Business License Application

City of North Salt Lake  
10 East Center Street • North Salt Lake • Utah • 84054  
801.335.8700  
[www.nslcity.org](http://www.nslcity.org)

Type of Application

- New Application   
 Change of Location   
 Change of Name   
 Other \_\_\_\_\_

License #: \_\_\_\_\_

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

Yearly Fee: \_\_\_\_\_

Pro-Rated Fee: \_\_\_\_\_

### NOTICE REGARDING HOME OCCUPATIONS

Home occupations that meet the following criteria are exempt from business licensure and fees:

1. Is operated only occasionally and by an individual under 18 years of age; or
2. A home business, whose combined offsite impact of the home business and the primary residential use does not materially exceed the offsite impact of the primary residence alone.

*Regardless of home occupation licensure, all home occupations are required to comply with NSL Code Section 10-10-5, Home Occupations, as amended.*

The City of North Salt Lake recognizes that some home business owners desire to obtain a yearly business license despite being exempt from licensure. Those ***business owners may voluntarily request*** a yearly business license. The cost for a voluntary home business license is \$25.00

### SECTION 1: BUSINESS INFORMATION

Business Name: \_\_\_\_\_ Start Up Date: \_\_\_\_\_ Parcel ID: \_\_\_\_\_

DBA (Doing Business As): \_\_\_\_\_ Zoning: \_\_\_\_\_

Business Location Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Local Business Phone: \_\_\_\_\_

Website: \_\_\_\_\_ Business Email: \_\_\_\_\_

State Sales Tax No: \_\_\_\_\_ Federal EIN: \_\_\_\_\_

State Professional License Type: \_\_\_\_\_ No. \_\_\_\_\_ Expires: \_\_\_\_\_

To apply for a Federal EIN, go to <http://www.irs.gov/Businesses/Small-Businesses-&Self-Employed/How-to-Apply-for-an-EIN>. To register your business and receive a State Sales Tax Number, go to <https://secure.utah.gov/account/log-in.html> (One Stop Business Registration). If you have additional questions regarding sales tax, contact the State Tax Commission at (801) 297.2200 or 210 N. 1950 W., SLC, UT 84134.

### SECTION 2: OWNER INFORMATION

Business Owner Name: \_\_\_\_\_ Driver's License No: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Owner Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone No: \_\_\_\_\_

**SECTION 3: REQUIRED SIGNATURES - OFFICE USE ONLY**

Community Development Department-801.335.8720  
Zoning Clearance Conditions:

Zone: \_\_\_\_\_

Community Development Approval:

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

Police Department-801.335.8650  
Police Review Conditions:

Police Department Approval:

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

Business Licensing-801-335.8701  
Licensing Conditions:

Business License Clerk Approval:

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

**SECTION 4: COMMERCIAL LICENSE FEES - OFFICE USE ONLY**

**Current Year License Fee:** \$ \_\_\_\_\_

*Prorated for Calendar Year 20\_\_\_\_\_*

**Please call**      **Penalty Fee:** \$ \_\_\_\_\_

**801-335-8701 to**

**pay Business**      **Total Fee:** \$ \_\_\_\_\_

**License Fee**

**Receipt #:** \_\_\_\_\_

**Yearly Renewal License Fee:** \$ \_\_\_\_\_

*Yearly license renewals will be mailed on November 15<sup>th</sup>  
and are due payable on January 2<sup>nd</sup>.*

**Renew Online**

**PENALTY:** The application and fees provided for herein shall be due and payable on or before the 2nd day of January of each year, or before commencing a new business, trade, service, or profession. All license fees shall be delinquent February 1st. License fees outstanding as of February 2nd will be subject to a 25% penalty. Fees remaining outstanding as of March 2nd will be subject to a 50% penalty, and all fees remaining outstanding as of April 15th will be subject to a 100% penalty and will be turned over to the City Prosecutor for further action.

**SECTION 5: APPLICANT STATEMENT**

- I am voluntarily requesting a business license for a home occupation and understand that I am not required by the City of North Salt Lake to obtain a license;
- Or,**
- The combined offsite impact of my home business and the primary residential use will materially exceed the offsite impact of the primary residence alone and therefore I am requesting a home business license from the City of North Salt Lake.
- And,**
- I hereby agree to conduct said business strictly in accordance with all City of North Salt Lake codes governing such business, and swear under penalty of law that the information contained herein is true and correct. I also understand that to falsify any information on this application is grounds for denial and/or revocation of this license and other penalties as provided by law. No business license shall be transferred from one person to another, nor from one location to another.

Applicant Signature: \_\_\_\_\_

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

Applicant Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

**SECTION 6: BUSINESS DETAILS**

Please describe your type of business in detail, including daily operations that will occur at this location:

--

**The following regulations apply to home occupations, regardless of exemption from licensure:**

The home occupation shall be clearly incidental and secondary to the use of the dwelling and shall not change the appearance, character or condition thereof. There shall be no displays, advertisements, stock-in-trade or signs related to the business, except those required by state law and which meet the provisions of this title.

Will this business require a remodel?	<input type="checkbox"/> No <input type="checkbox"/> Yes, <i>see building department for permit</i>
---------------------------------------	---

Does this business require a sign by state law?	<input type="checkbox"/> No <input type="checkbox"/> Yes, <i>see building department for permit</i>
---	---

What are the hours of operation for your business:	
--	--

Only members of the family related by blood, marriage or adoption, and who reside in the dwelling, may work onsite. One (1) additional person may be employed as a secretary, apprentice or assistant where there are no more than five (5) family members actively engaged in the home occupation. Employees who are not family members and/or who do not reside at the dwelling shall not meet, park or otherwise congregate at the home or in the general vicinity.

How many employees will be working at this location?	Family: _____	Non-Family: _____
--	---------------	-------------------

How many off-site employee workers will be employed?	
--	--

The home occupation shall not involve more than one room in the dwelling and cannot exceed twenty percent (20%) of the ground floor area.

What portion of the home will be used for the business?	Room: _____	Percentage: _____
---	-------------	-------------------

The home occupation shall be conducted entirely within the dwelling, except for work performed offsite. It shall not involve the attached garage or carport section of the dwelling, nor any accessory garage, building or yard space or activity outside of the main building.

Will the home business require the storage of materials or supplies, outside the portion of the home dedicated to the home?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Location: _____
---	---

The home occupation shall not involve the sale of commodities on the premises. Commodities may be produced on the premises and sold through other business outlets not on the premises. Items that are incidental to a service provided may be sold on a limited basis, i.e., a beautician who also sells hair products to clientele.

Will any commodities to be sold on the premises:	<input type="checkbox"/> No <input type="checkbox"/> Yes, Describe: _____
--	---

The home occupation shall not create noise, dust, odors, noxious fumes, glare or other nuisances, including interruption of radio and/or television reception, which are discernible beyond the premises.

Will the business create noise, dust, odors, noxious fumes, glare or other nuisance?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Describe: _____
--	---

The home occupation shall not create a hazard by using or storing flammable material or explosives or other dangerous materials.	
Will the business store hazardous, flammable material or explosives?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Describe:
The home occupation shall not create unusual amounts of waste, residential or otherwise.	
Will the business create additional amounts of waste?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Describe:
The home occupation shall not involve the use of mechanical or electrical apparatus, equipment or tools not commonly associated with a residential use, or as are customary to home crafts.	
Does the business use equipment or tools not associated with residential use?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Describe:
The home occupation shall not generate traffic in greater volumes than would normally be expected in a residential neighborhood, with the exception of daycares, preschools, and private swimming lessons, nor involve the use of commercial vehicles other than standard delivery vehicles for delivery of materials to or from the premises.	
Please explain the traffic generated by customers or delivery vehicles for this business:	
The home occupation shall not involve the use or parking of equipment or motor vehicles having a gross weight of twelve thousand (12,000) pounds or more directly at the residence. One vehicle under twelve thousand (12,000) pounds may be used in association with the home occupation, provided it is garaged or stored entirely within a building or structure.	
Describe all vehicles associated with the business and the storage provided:	
The home occupation shall be in conformance with all applicable fire, building, plumbing, electrical and life safety and health codes of the state, the county and the city.	
Will the business require upgrades to any life safety or health codes?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Describe:
All home occupation business licenses shall be valid for one year and may be renewed annually, provided there have been no reported violations, complaints or detrimental characteristics which may, in the opinion of the city's development review committee, require termination of said home occupation.	
Have any complaints been filed related to the proposed home occupation at this location?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Describe:
Handicapped persons may obtain a waiver of one or more of these conditions through the city's planning commission to allow such persons to become self-sufficient.	
Do you require an accommodation related to any of the above requirements related to a disability?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Describe: