Planning Department

HOME OCCUPATION

Verification

250 Bouscaren St, Ste 203
Slidell, LA 70458
985.646.4320
fax 985.646.4356
planningdept@cityofslidell.org
myslidell.com

This form verifies that the home business/occupation described below is permitted by the City's zoning regulations. This form by itself does not grant all permissions that may be needed to start a business.

Site (REQUIRED)

Street Address:_____

Zoning District:_____

Home Occupation/Business (REQUIRED)

Name of Business:_____

Type of Business (describe in detail):

_____

_____

_____

_____

Applicant & Business Conductor (REQUIRED)

Applicant must be the individual that will be conducting the business and must reside at the street address listed above

Name:_____

Phone #_____

Email:_____

☐ **Attach a copy of a valid form (driver license, voter registration, passport) that proves the address above is the principal residence of the applicant**

I certify that the information on this form is true to the best of my knowledge and that the business shall be conducted in accordance with the City of Slidell Code of Ordinances and other applicable laws.

_____ _____

Signature of Applicant Date

Approved	By:	Fee $
Not Approved	Date:	Permit #

Certifications (REQUIRED)

1. Will all business activities be conducted solely by members of the immediate family *(by blood or marriage)* residing in the home? ☐Yes ☐No

2. Is the business incidental and secondary to the primary residential use of the home? ☐Yes ☐No

3. Will all business activities take place entirely within the home and not in an accessory structure *(e.g., garage, carport, shed)*? ☐Yes ☐No
(Exception: Swimming pools may be used for swimming lessons.)

4. Will the home maintain its residential appearance without any interior or exterior modifications that would make it look like a business? ☐Yes ☐No

5. There will be no visible signs, displays, or activities outside the home that indicate business operations. ☐Yes ☐No

6. Will the business occupy less than 25% of the total floor area of the home? ☐Yes ☐No

7. Will only equipment and materials typically found in a home be used or stored on the premises? ☐Yes ☐No

8. Will all goods or materials stored on-site be limited to those deliverable by USPS, courier, private delivery service *(up to 1.5 tons)*, or the personal vehicle of the business operator? ☐Yes ☐No

9. There will be no sale of goods or products directly from the home *(e.g., no storefront or retail operation).* ☐Yes ☐No

10. Will all vehicles associated with the business be parked in designated areas ***(not on the grass)***, with no more than two passenger cars and one commercial vehicle *(up to 1.5 tons)* on-site? ☐Yes ☐No

11. ***(For professional businesses only):*** Will the business be limited to consultation or instruction services? ☐Yes ☐No ☐N/A

12. ***(For child care services only):*** Will no more than seven children *(excluding those residing in the home)* be present at any one time? ☐Yes ☐No ☐N/A