



Town of Bedford Home Occupation / Business Form

Applicant Information

Applicant Name _____ Date _____

Address _____ Telephone No. _____

Address of occupation / business (if different) _____

Are you the owner or tenant? Owner Tenant

If tenant, please provide letter of acknowledgment from owner

Occupation / Business Information

1. Type of occupation / business _____

2. D.B.A. _____

3. Please provide a brief description of what is involved in the operation of the occupation / business.

4. Will this occupation / business be secondary to the residential use? Yes No

5. Number of employees (including yourself)? _____

6. Will there be any external changes to the property? Yes No

7. Will there be storage of materials, equipment, or product on the premises? Yes No

8. If yes, please specify type, storage location, and quantity. _____

9. Will there be deliveries made to the premises? Yes No

10. If yes, please specify type of deliveries and frequency. _____

11. Will there be customers / clients visiting the premises? Yes No

12. If yes, please specify number of customer / clients and frequency. _____

13. Will there be any signage advertising occupation / business? Yes No

14. If yes, will this sign be affixed to the house or be supported by a post / pole?

Affixed Supported

Please specify size of sign and the wording to be used.

signature of applicant