



**SHIRE OF EAST PILBARA**

**ADDITIONAL INFORMATION FOR HOME-BASED BUSINESS APPLICATIONS**

**NOTE: THIS FORM IS TO BE COMPLETED IN ADDITION TO THE APPLICATION FOR DEVELOPMENT APPROVAL FORM WHERE A HOME-BASED BUSINESS IS PROPOSED**

APPLICANT DETAILS (Person who intends to hold the Home-Based Business Permit)			
Name:			
Postal Address:			
Daytime Phone:		Mobile:	
Email:			
Do you own or rent the premises in which you intend to operate the home-based business?	<input type="checkbox"/> Own	<input type="checkbox"/> Rent	
<i>If you rent the premises, you will require the owner of the land to sign the Application for Development Approval form or provide written agreement to the application being considered prior to this application being lodged.</i>			
Signature:		Date:	
HOME-BASED BUSINESS DETAILS			
Description of Business / Service to be Provided:			
Trading Name:			
Days and Hours of Operation:			
No. Employees that do not reside at premises.		Floor Area of Business:	
Type of equipment or machinery to be used:			
Will there be client / customer visits to the property?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Frequency of client / customer visits?		No. Parking spaces on the property.	
Location of Business on Property	<input type="checkbox"/> In Dwelling	<input type="checkbox"/> In Outbuilding	
Are you preparing or handling food?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you providing a service that requires skin penetration (e.g. waxing, piercing, tattooing)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>PLEASE ATTACH THE FOLLOWING:</b>			
<ul style="list-style-type: none"> <li>• A floor plan showing the location of the home-based business within the premises.</li> <li>• Any other information you wish the local government to take into account when considering the application.</li> </ul>			
OFFICE USE ONLY			
<input type="checkbox"/> Home Occupation		<input type="checkbox"/> Home Business	