



COMMUNITY DEVELOPMENT DEPARTMENT | PLANNING DIVISION 1315 VALLEY DRIVE | HERMOSA BEACH | CA 90254

FOR QUESTIONS PLEASE CONTACT <u>PLANNING@HERMOSABEACH.GOV</u> OR CALL (310) 318-0242 **Office Hours:** Monday to Thursday, 7:00 a.m. to 6:00 p.m.

HOME OCCUPATION BUSINESS LICENSE APPLICATION

Addre	ess of Business:	Please Check One
Busine	ess Name:	☐ New Application
Applic	cant's Name:	☐ Change of Addre
Applic	cant's Phone:	☐ Change of
Applic	cant's Email:	Business Name
Descri	ibe Business Activity in detail (items sold, services provided, activities conducted)	ed in residence):
Please	answer the following questions:	
1.	Which area of your residence will the home occupation be conducted?	
2.	What is the total square feet of your residence?	
3.	What is the square feet that will be utilized for your home occupation?	
4.	Will there be customers/clients visiting site? □Yes □No	
5.	Materials stored on site? Yes No If yes, where? Type(x) of metarial(x):	
	Type(s) of material(s):	
6.	Employee(s) on site (besides resident)? □Yes □No	

In connection with the Home Occupation, <u>all</u> of the following conditions from Hermosa Beach Municipal Code (HBMC) **Subsection 17.08.020 (D)** must be satisfied:

- 1. Such occupation shall be carried on only by occupants of a dwelling and shall involve the use of not more than four hundred (400) square feet, not to exceed twenty-five (25) percent of the total area of the permitted buildings on the premises.
- 2. Inventory and supplies for such home occupation shall occupy not more than twenty-five (25) percent of the permitted area and shall be stored entirely within an enclosure or building.

- 3. No sale of goods is permitted on the premises.
- 4. No employees are allowed.
- 5. No signs are permitted.
- 6. No display of any kind shall be visible from the exterior of the premises.
- 7. Light, but not medium or heavy, business machines are allowed. The classification by the planning department shall be final.
- 8. No presses, data processing equipment, or any electrical or other equipment requiring specialized electrical installation, or requiring over one hundred twenty (120) volts of power to operate are allowed, nor shall any mechanical shop or electrical tools be permitted except those which are customary to home crafts.
- 9. No tools or equipment may be operated which make a sound audible from without the premises at a distance of twenty (20) feet from the property line, between the hours of six p.m. and nine a.m. No activity or equipment which makes any loud or whining noise discernible from without the premises is permitted at any time.
- 10. No garaging or storing of vehicles bearing any advertising related to the home occupation is allowed upon the premises or in the street in the vicinity.
- 11. No foot or vehicle traffic may be generated to or from the premises except for traditional uses such as tutors and day care centers as approved by the planning director.
- 12. There shall be complete conformity to fire, building, plumbing, electrical, zoning and health codes and to all state and city laws and ordinances; except, where required parking spaces are not available, the planning commission may temporarily waive such requirements if they find:
 - a. The garage, carport or space is not available solely because of temporary storage, and not because of construction and/or building improvement or modifications, and
 - b. The temporary storage is not related to products, materials, etc., used for the conduct of the home occupation, and
 - c. Such waiver to be effective only if no detrimental effects are caused to adjacent properties and no valid complaints were filed due to storage.
- 13. No structural alterations of the premises are permitted solely for the benefit of the business.
- 14. No listing or advertising of the address of such home occupation for business purposes is permitted including display ads in telephone, business and city directories and in newspapers and magazines. The telephone number and address may be listed on business cards.
- 15. The term of any permit shall be for one year, or for such other period as shall be authorized by the city council.

- 16. It shall be a condition of any permit hereunder that the applicant shall agree that, in the event of amendment of this section to prohibit such or any home occupation in a zone in which the same is situated, that such home occupation shall not have the status of nonconforming use, and may be eliminated forthwith without provision for extended liquidation or amortization.
- 17. Prior to permit approval, the premises shall be inspected to determine compliance with all limitations and requirements, particularly subsection D (12) of this section.

I, (print), have Occupation" as established by the City of Hermosa Beacknowledge that my business shall be in full conformation.	re read and understand the restrictions for a "Homeach Municipal Code Subsection 17.08.020 (D) and lance.	ne nd
Applicant's Signature:	Date:	_
For Office Use:		
COMMUNITY DEVELOPMENT DEPARTMENT ☐ Approved ☐ Denied Special Condition(s) if applicable:	_	
Staff Signature:	Date:	
FINANCE CASHIER DEPARTMENT Business License Number: Notes:		
Fire Inspection Date:	Fire Inspector Initial:	
Fire Inspection: □Passed □Failed Staff Signature:	Date:	



CITY OF HERMOSA BEACH

1315 Valley Drive • Hermosa Beach, California 90254 Attn: Business License • (310) 318-0206 • FAX (310) 937-5959 • Please Check One •

NEW APPLICATION □

CHANGE OF OWNER □

CHANGE OF ADDRESS □

CHANGE OF BUS NAME □

HOME OCCUPATION □

BUSINESS LICENSE APPLICATION

Business Name	• OFFICIAL USE ONLY •
Corporate Name	LICENSE NO.
(If Different) Business Location	
(Not P. O. Box)	SICCODE
CityState	Zip RATE TYPE
Bus. Phone ()	REGISTERDATE
Mailing Address	
(If Different) CityState	CDEDIT CARD
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Ownership: ☐Corporation ☐Partnership ☐Trust ☐Sole Proprietor ☐Ltd Liability Corp.	(I. D. No. or Social Security No.
Start Date Description of Business	
Secondarion of Secondarion	
Bus. Fax ()Email Address	
State Lic. NoLicense Type	Resale No.
PERSONAL INFORMATION - Enter below names of Owners, Partners, or	or Corporate Officers - Use Additional Sheets as necessary
Owner Name_	TitlePhone ()
Home Address	
CityState	
onyotate	
Owner Name	
Home Address	
CityState	Zip
Emergency Notification - In case of an emergency and I cannot be re	eached, please call:
Name	TitlePhone ()
	Cell Phone ()
CityState	`
Alarm System (if applicable)	
Name	Phone ()
Address	License No.
PLEASE FILL IN THE APPROPRIATE BOXES BELOW AND SIGN ON REVERSE SIDE	FOR CITY USE ONLY
Gross Receipts \$	NOTICE: Under federal and Base Tax \$
Gloss Receipts	state law, compliance with disability access laws is a Gross Receipt Tax \$
Number of Employees Full Time Part Time	serious and significant responsibility that applies to all
Number of Vehicles	California building owners and tenants with buildings open to
	the public. You may obtain information about your legal Employee Tax \$
Total Number of Units	ply with disability access laws Surcharge
Owner Exempt Unit Yes No	at the following agencies: The Division of the State Archi-
Number of Days Open after 12 AM	tect at www.dgs.ca.gov/dsa/ Home.aspx-TheDepartment Application Foo
Mon. Tues. Wed. Circle the Days Open after 12 AM Thurs. Fri. Sat. Sun.	of Rehabilitation at www.rehab.cahwnet.gov -
Number of Vending Machines	The California Commission on Disability Access at www.ccda.ca.gov.
Thank you for doingbusiness in the City of Hermosa Beach	PLEASE MAKE CHECK PAYABLETO THE CITY OF HERMOSA BEACH

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Signatu	re						Date		
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I HAVE	READ SAID RUL	ES AND REGUI	_ATIONS AND	AGREE TO ABID	E BY SAME:				
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