



City of Frankfort
PLANNING & BUILDING CODES
DEPARTMENT
P.O. Box 697
Frankfort, Kentucky 40602
Phone: (502) 352-2094 Fax: (502) 875-3579
www.cityoffrankfortky.com

HOME OFFICE QUESTIONNAIRE

This questionnaire must be completed by Business License applicants when the proposed business will be located in their home. The Planning & Building Codes Department will review this information to determine if the business can be approved administratively as a "Home Office" or if approval of the business as a "Major Home Occupation" is required by the Board of Zoning Adjustments.

1. Name of Applicant/Business _____
2. Location of Business _____
3. What type of work will take place at this location? _____
4. Will you have any employees working in your home who do not reside there? _____
5. Total number of employees (including yourself) _____
6. Estimated square footage of office area for your business use _____
7. Estimated square footage of your home _____
8. Is the home one-story or two story (Circle answer, basements are counted as a story).
9. What type of equipment will be used in conjunction with the business at this location?

10. Will there be any storage of materials, supplies, or goods at this address? Yes No
If so, please list them: _____
12. Will there be any customers coming to your home? Yes No
13. Please briefly explain the process of how your business will be conducted : _____

I have read the attached section 19.07, Home Occupations, of the Frankfort Zoning Ordinance. I have understand the limitations contained within the regulation and that violation of any part of Section 19.07 constitutes as criminal offense punishable by up to \$500 for each violation.

Signature _____ Print Name: _____

Mailing Address _____

Phone number (daytime) _____

Planning Department Use Only:	Zone: _____
Reviewed by: _____	Date: _____
Conditions: _____	
Approved : <input type="checkbox"/> _____	Disapproved: <input type="checkbox"/> _____