



**Planning and Zoning Department**  
City Hall 203 E. Main Neosho, MO 64850 Phone 451-8050

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## **PROCEDURE FOR HOME OCCUPATION REGISTRATION**

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Any business or commercial activity which is clearly incidental and secondary to the use of a residential dwelling must be registered with the City of Neosho. Below is the procedure for registering home occupations with the City of Neosho.

1. A Home Occupation Registration Form shall be completed and submitted to City Hall for any persons operating a business from their home. A parking diagram must be submitted with the application.
2. The Home Occupation Registration Questionnaire will be reviewed by City staff.
3. If it is determined that the home occupation will not create adverse impacts upon the surrounding neighborhood, the occupation may then be licensed and operations may continue.
4. If it is determined that the home occupation will create an adverse impact upon the surrounding neighborhood, their property owner must be issued a Special Use Permit to continue operation of the home occupation.



# Home Occupation Registration

City Hall 203 E. Main Neosho, MO 64850 Phone 451-8050 Fax 451-8065

Date of Application: \_\_\_\_\_ Business License #: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Name of business: \_\_\_\_\_

Address for which Home Occupation Permit is being requested:

Zoned: \_\_\_\_\_ Are you the property owner Yes  No

If no, please provide property owners name, address and telephone number.

Occupation to be conducted at this location? \_\_\_\_\_

List specific activities involved:(i.e. repairing clocks, sale of goods, day care, etc.)

Hours and Days of Operation: \_\_\_\_\_

Will people come to your home to obtain any product or utilize any service connected with the proposed home occupation? Yes  No

If yes, estimate the number of customers coming daily to this location: \_\_\_\_\_

Explain in detail: \_\_\_\_\_

If providing day care services, how many non related individuals will you be caring for in your home? \_\_\_\_\_

Is a state license required for the proposed Home Occupation? Yes  No

**If yes, attach a copy of State License.**

Number of employees that reside at location, including yourself: \_\_\_\_\_

Number of employees that are not residence of location: \_\_\_\_\_

The Home Occupation be located in the residence  Other structure

Square feet of residence: \_\_\_\_\_ Square feet used for occupation: \_\_\_\_\_

Are any other Home occupations being conducted at this location? Yes  No

Has a Home Occupation previously been conducted at this location? Yes  No

If yes, what occupation? \_\_\_\_\_ Date begun: \_\_\_\_\_



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Will this Home Occupation require:

- Yes  No  Any alteration in appearance to structure?
- Yes  No  Any mechanical, electrical or other equipment that interferes with radio or TV Signals?
- Yes  No  Any equipment/activity that causes noise or dust?
- Yes  No  The storage of any materials or supplies that are combustible?

If you answered yes to any of the above questions, please explain in detail:

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Will any goods be displayed/stored outdoors or in any exterior window? Yes  No

Will the Home Occupation involve the use of a commercial vehicle for delivery of materials to or from the premises? Yes  No

If yes how often? \_\_\_\_\_

**Attach a drawing indicating parking for customers/commercial vehicles/delivery trucks for this business.**

I understand that the operation of a home occupation at this location is subject to the requirements of all applicable provisions of the City Code regarding home occupations in residential areas, a copy of which has been provided to me. I hereby consent to the City entering upon these premises at reasonable times to conduct necessary inspections including, but not limited to, building and fire inspections.

Applicant signature \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner Signature \_\_\_\_\_ Date: \_\_\_\_\_

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City Information:

Denied  Approved  Conditions/Reason:

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Signature / City Planner