



RE: Nontraffic Home Occupation

Dear Applicant:

Attached is an application for a Certificate of Occupancy for a **Nontraffic Home Occupation**. Please fill out as neatly and completely as possible and return it to the Building and Planning Department for review. This form must be notarized and a **\$100.00** fee, payable to Lower Merion Township, must accompany each application.

If your use meets the requirements of a Nontraffic Home Occupation, a Certificate of Occupancy will be issued. You will also be required to obtain a business license from the Lower Merion Township Finance Department. The Certificate of Occupancy will be held until the business license from the Finance Department is issued.

Any application, which is not legible or is incomplete will be returned. If additional information, not called for on this application is needed, you will be notified accordingly.

Please be advised that the operation of any home occupation without a Certificate of Occupancy and a Business Privilege License is a violation of the Lower Merion Township Code.

If you have any questions concerning home occupations, please contact me at 610-645-6172 or [mwylie@lowermerion.org](mailto:mwylie@lowermerion.org).

Sincerely,

Michael Wylie, Zoning Officer  
Building and Planning Department

**TOWNSHIP OF LOWER MERION**  
**APPLICATION FOR A CERTIFICATE OF OCCUPANCY**  
**FOR A NON-TRAFFIC HOME OCCUPATION**

(Please print or type in answers. If more space is needed please use separate sheets)

NAME OF HOME OCCUPATION: \_\_\_\_\_

APPLICANT: \_\_\_\_\_ TELE NO. \_\_\_\_\_

LOCATION: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

TYPE OF OPERATION: \_\_\_\_\_

OWNER OF PROPERTY: \_\_\_\_\_

(1) Do you have a Lower Merion Township Business Privilege License? \_\_\_\_\_

If so, what is your Account No.? \_\_\_\_\_

(2) Is this your principal residence? \_\_\_\_\_ If not explain: \_\_\_\_\_

\_\_\_\_\_

(3) What functions will actually occur at the property during the normal day to day operation of the Home Occupation? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(4) Will you operate alone from this location? \_\_\_\_\_ If not explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE STAMP  
(Township Use)

(5) Do any employees work on the premises? \_\_\_\_\_ If yes, are they required by law to accompany you during the operation of your Home Occupation? \_\_\_\_\_ If so explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(6) Will there be any clients, customers, employees, patients or deliveries, etc. coming to your home in connection with the operation of your Home Occupation? \_\_\_\_\_  
**( Be advised that FedEx, UPS, etc. deliveries in conjunction with home occupations are considered commercial traffic visits. If deliveries are an integral part of your home occupation, you must apply for a Minor Home Occupation. )**  
If so explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(7) Will there be any traffic of any kind generated from the use of this property as a Home Occupation? \_\_\_\_\_ If so explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(8) What floor or floors will you operate your Home Occupation from? \_\_\_\_\_

(9) What is the total square footage of this floor area? \_\_\_\_\_

(10) How many square feet of area will your Home Occupation occupy? \_\_\_\_\_

(11) Will alterations be necessary to accommodate this Home Occupation? \_\_\_\_\_ If so explain in detail: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 12) Do you request the use of a business vehicle on the property? \_\_\_\_\_  
If so, detail the type of vehicle and the location of its parking space: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- (13) How many off-street parking spaces (Minimum 9 x 19 ft.) are provided on this property? \_\_\_\_\_
- (14) Do you have any signs visible from the exterior of the property? \_\_\_\_\_ If so give size, description and location: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- (15) Is any area outside of the building used in conjunction with your Home Occupation? \_\_\_\_\_  
If so explain: \_\_\_\_\_  
\_\_\_\_\_
- (16) Are goods publicly displayed on the premises? \_\_\_\_\_ If so explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- (17) Will the existence of your Home Occupation be visible from the exterior of the property? \_\_\_\_\_ If so explain: \_\_\_\_\_  
\_\_\_\_\_
- (18) Do you operate this business activity at any other location? \_\_\_\_\_  
If so where? \_\_\_\_\_
- (19) Is your home the primary or secondary location for this business? \_\_\_\_\_
- (20) What is your principal occupation and where is it principally conducted? \_\_\_\_\_  
\_\_\_\_\_

Commonwealth of Pennsylvania

County of: \_\_\_\_\_

The undersigned swears that all information provided above and attached hereto is true and correct. Applicant understands that he or she is restricted by the Lower Merion Township Zoning Code and is bound by the information provided above. Any deviation from the terms under which the Certificate of Occupancy is issued will result in cancellation of the Certificate and termination of the use.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

Subscribed and sworn to

Before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC

\*\*\*\*\*

OFFICIAL USE ONLY

Received By \_\_\_\_\_  
Certificate No. \_\_\_\_\_

Approved by: \_\_\_\_\_  
Receipt#: \_\_\_\_\_

COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_