



Community Development
Home Business Zoning Permit

Home Business Application

Zoning approval does not necessarily mean town approval of your project. Check with all departments for other applicable permits or licenses.

Property Information

Complete Property Address:

Legal Description - Find at Boulder County Assessor maps.boco.solutions/propertysearch Zone District - townoflyons.com/maps

Property Use Type (check one): Single-Unit Dwelling Two-Unit Dwelling Multi-Unit Dwelling

Primary Resident	Name (Last, First):		Phone:
	Address:		Email:
	City:	State:	Zip:

Applicant Contact Information

	Applicant (check one): <input type="checkbox"/> Primary Resident (see contact information above) <input type="checkbox"/> Agent of Primary Resident (see below)		
	Name (Last, First):		Phone:
	Address:		Email:
	City:	State:	Zip:

Home Business Proposal

Provide a detailed description of the proposed home occupation in a narrative below (attach additional pages if needed).

Home occupation location (check all that apply): within the primary structure within a detached accessory structure unenclosed (outdoors)

Is the subject property your primary residence (check one): Yes No

If no, please explain:

Will the proposed home business be retailing or wholesaling any stock, supplies or items accessory to the business? Yes No

If yes, please explain:

What are the hours of operation for the proposed home business?

Please provide a short explanation of how off-street parking will be provided for the proposed home business:

Gross Floor Area of Home Occupation: _____ Square Feet Gross Floor Area of Primary Residence: _____ Square Feet

Does the proposed home occupation employ anyone who resides outside of the home? Yes No

If yes, please explain:

Signs

I will comply with the applicable sign limitations, which include a maximum of one sign per business. Wall-mounted signs only, with a two (2) square foot Maximum Area (per LMC 16-9-120.a):

Size: _____ Square Feet
 N/A - no signage proposed

TOWN OF LYONS

www.townoflyons.com/communitydevelopment
432 5th Ave. PO BOX 49 Lyons, CO 80540



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Zoning Code Applicable Limitations - LMC 16-10-30

- Such use shall be conducted entirely within the principal dwelling and/or an accessory structure associated with the residential use and shall be carried on by the inhabitants of the principal dwelling and a maximum of one (1) employee.
- The total area used for such purposes shall not exceed one-half (½) the first floor area of the user's dwelling unit.
- Such use shall be clearly incidental and secondary to the use of the dwelling for dwelling purposes and shall not change the character thereof.
- There shall be no substantial retailing or wholesaling of stocks, supplies or products conducted on the premises of a home business; however, delivery of retail products to the consumer off the premises, such as in the course of an Internet or mail order business, shall be permitted.
- There shall be no exterior storage on the premises of supplies or materials used in the home business.
- There shall be no storage, use or discharge of any chemically hazardous or explosive materials within the structures or upon the exterior of the property.
- A home business shall not generate or result in nuisances such as noise, vibration, odor, glare, fumes, electromagnetic interference or hazards greater than that usually associated with residential uses.
- A home business shall provide an off-street parking area adequate to accommodate all needs created by the home business.
- Such use shall not produce traffic volumes of more than eight (8) business-related vehicle visits daily. The employee, if any, shall be included in the count of business-related vehicle visits
- Business-related visits to the home business are only allowed from 7:00 a.m. to 7:00 p.m. daily.

Signatures Required

The permittee accepts full responsibility for compliance with all Lyons zoning codes and all other town regulations as applicable. Zoning inspections may be required before occupancy is permitted.

By my signature, I attest to the best of my knowledge and belief that the information stated in this application and in all supporting plans and documents is true and consistent with the standards and limitations of the Town of Lyons.

Signature (Primary Resident or Authorized Agent): _____

Full Name (Print): _____ Date: _____

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