



City of Whiting, Indiana

Home Occupation Application

Name of Individuals operating the Business:

Name of Business:

Type of Business:

Owner of the Property, Address, and Phone Number:

Location of Business Operation on Property:

Primary Contact Phone Number: _____

Reference City of Whiting Zoning Map (www.whitingindiana.com) or Zoning Administrator for Zoning Clarification of Property.

Reference Whiting Unified Development Ordinance for Home Occupation Regulations:

Single Family Detached - Section 3.5-14

Residential Medium Density - Section 3.6-15

Residential High Density - Section 3.7-15

I acknowledge all terms and conditions regulating Home Occupation and agree to abide by them.

Signature of Applicant

Date

Approved

Denied

Zoning Administrator