

Proposed Business Name/DBA _____

Applicant/Contact Name _____

Proposed Business Address _____ Executive Suite

Primary Phone _____ Business Cell Email _____

New Business Change of Ownership Change of Address Update Business Activity Special Event

Concisely describe the specific business activity _____

Does the business use or store hazardous materials/chemicals? Yes No

If YES, applicant must complete [hazardous materials questionnaire](#) (also available at Community Development).

What is the square footage of the space your business will occupy? _____ square feet

***Home-Based Business Only:** By signing below, you are acknowledging you have read and will comply with the Home Occupation standards in Section 19.9.3.E of the Henderson Municipal Code. Also, you are acknowledging you are the property owner or have obtained permission from the property owner to operate a home-based business at the above-referenced address. Non-compliance is grounds to revoke the business license.

***Non-Residential Locations Only:** A site plan or building layout that clearly identifies the location the business will be occupying is required for all applications.

The information provided is accurate and correct:

Applicant Signature _____

Date _____

Final approval by the Community Development Department is not granted until the items below and City Inspections are completed.

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

APN	_____ <input type="checkbox"/> Address Verified <input type="checkbox"/> Redevelopment Overlay
ZONING	_____ <input type="checkbox"/> Home Based Business
USE CLASSIFICATIONS AND COMMENTS	
APPROVAL CONDITIONS	<input type="checkbox"/> Conditional Use Permit # _____ <input type="checkbox"/> Conditional Use Permit # _____ <input type="checkbox"/> Design Review # _____ <input type="checkbox"/> Variance # _____ <input type="checkbox"/> Vehicle Travel Distance# _____ <input type="checkbox"/> Zone Change # _____ <input type="checkbox"/> Pre-Existing Use _____ <input type="checkbox"/> Other _____
STATUS	<input type="checkbox"/> Permitted <input type="checkbox"/> Denied <input type="checkbox"/> Pending _____
CD REVIEW	Signature _____ Date _____
FIRE PERMIT REQUIREMENT	<input type="checkbox"/> Required <input type="checkbox"/> Not Required Date _____ <div style="text-align: right;">Fire Plans Initials</div>