



Planning Department
401 Laureate Way
Kannapolis, NC 28081
704.920.4350
gburwell@kannapolisnc.gov

HOME OCCUPATION PERMIT APPLICATION

Applicant Contact Information

Name: _____

Address: _____

Phone: _____

Email: _____

Property Owner Contact Information same as applicant

Name: _____

Address: _____

Phone: _____

Email: _____

Occupation Information

Type of business to be conducted: _____

Zoning Designation: _____

Is yard fenced? Yes No N/A

Do you expect home deliveries? Yes No N/A; if Yes, how often? _____

Do you expect client visits? Yes No N/A; if Yes, how often? _____

If yes to above question, do you have adequate parking? Yes No N/A

Other

By signing below, I acknowledge that I have reviewed KDO [Section 4.3.D\(10\)](#) Home Occupation Standards and that I will abide by all rules and regulations.

Applicant Signature

Date

Property Owner Signature

Date

Permit Fee: \$50

Updated 1/2023