

**Deer Lake Borough**  
Schuylkill County, Pennsylvania  
**Office of Zoning Administration**  
238 Lake Front Dr. Orwigsburg, PA 17961

Phone: (610) 562-4142

Zoning Officer Phone: (570) 628-2300

**Home Occupation Questionnaire**

(Based on Section 5.200 of Ordinance #28)

<b>Subject Property</b>		
Tax Assessor's Parcel Number(s)		
Property Address or Site Location		
Owners Name:		Phone:
Address:		Fax:
City/State:	ZIP:	Email:

In order for the Zoning Officer to determine if the proposed Home Occupation, or a No-impact Home Based Business (NHBB) is permitted under the Deer Lake Borough Zoning Ordinance, the applicant will need to provide some information that is directly related to the review of a proposed Home Occupation use or No-impact Home Based Business.

**INSTRUCTIONS**

Please review the definitions of a Home Occupation and No-Impact Home-Based Business listed below and **answer all** the questions for the appropriate section of the questionnaire. When utilizing a separate sheet of your response to a given question, **you must** indicate the Section and question number that your answer is associated with.

**DEFINITIONS**

**Home occupation** - In any residential district, all dwelling units with direct access to a public street may be used for the practice of a home occupation provided such occupation is incidental or secondary to the use of the property as a residence. (Section 5.200)

**SECTION 1 - Description of the proposed Home Occupation**

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Deer Lake Borough Home Occupation Questionnaire

**SECTION 2 – Home Occupation** (if the activity is a No-impact Home Based Business, skip to Section 3)

- a. Will the proposed home occupation be used as a professional office of a doctor of medicine, surgeon, dentist, architect, lawyer, accountant, insurance agent, tax collector, engineer, music or voice instructor (if limited to a single pupil at a time), dressmaker, milliner, or seamstress shall be deemed to be a “home occupation”, and will the principal person so employed is a resident of the dwelling?  
 Yes    No (If no, please explain on a separate sheet of paper)
  
- b. For any other use, other than what was stated within item A from above, will the principal person employed be a resident of the dwelling?  
 Yes    No (If no, please explain on a separate sheet of paper)
  
- c. Will there be more than two (2) assistants employed to assist the primary operator of the home occupation?  
 Yes    No (If yes, please explain on a separate sheet of paper)
  
- d. Does the property where the home occupation is being proposed provide for at least two (2) additional off-street parking spaces in addition to the required parking for the dwelling unit?  
 Yes    No (If no, please explain on a separate sheet of paper)
  
- e. Will the proposed home occupation occupy more than twenty-five (25) percent of total floor area of the dwelling unit?  
 Yes    No (If yes, please explain on a separate sheet of paper)

**SECTION 4 - Certification**

**Owner / Applicant Certification**

By my signature below, I hereby certify the following:

- 1. I understand that if my application is denied, there is no refund of fees paid.
- 2. I understand that any error, misstatement or misrepresentation of material fact, either with or without intention on the part of the applicant, such as might or would operate to cause a refusal of this application, or any change in the location, size or use of structure or land made subsequent to the issuance of this permit, without the approval of the zoning office, shall constitute sufficient ground for the revocation of the permit.
- 3. I understand that this permit applies to Deer Lake Borough Zoning only and shall not relieve me from obtaining such other permits as may be required by law.
- 4. I certify that the information provided in this application, including attachments, is accurate and correct to the best of my knowledge.
- 5. I certify that I am authorized by the owner to make the foregoing application and that, before I accept any permit for which this application is made, the owner shall be made aware of all of the conditions of the permit.
- 6. I understand that if I unknowingly make any false statements herein, I am subject to such penalties as may be prescribed by law or ordinance.

Signature (Blue Ink):	Date:
Print Name:	Phone: