



**Application for Home Occupation**  
 Community Development Department Planning Division  
**Mailing Address: P.O. Box 508, Biloxi, MS 39533**  
 Office Location: 676 Dr. MLK Blvd.,  
 Building (228) 435-6270 Planning (228) 435-6266 Fax (228) 435-6188

**Application # \_\_\_\_\_**

**HOME OCCUPATION** is defined as an activity carried out for gain by a resident and conducted as a customary incidental, and accessory use in the resident’s dwelling unit. This definition of Home Occupation use permits a limited list of potential occupations within a dwelling, for those activities that are clearly incidental thereto; carried on by a member of the family residing on the premises, provided that no person who is not a resident of the principal dwelling is employed; that not more than twenty (20) percent of the floor area of the dwelling is used for the home occupation; and that no stock in trade is kept or commodities sold; that no outside storage of any kind, and no advertising devices are placed on the property; that no mechanical equipment is used, except that which is normally utilized for family, domestic or household purposes; and that there is no exterior indication (including noise, vibration, smoke, dust, odor, heat, glare, unhealthy condition, or a traffic or parking problem) that the building is being used for any purpose other than as a dwelling. The operator is responsible for obtaining and maintaining all required permits and licenses, as required by City ordinance. A complete recitation of conditions and limitations place upon Home Occupations can be found in Section 23-4-4(c) (9) of the Land Development Ordinance, available on-line at www.biloxi.ms.us.

**SPECIAL NOTES:** *If such dwelling is being leased, written permission from the property owner will need to be provided in addition to this application. If the Home Occupation involves a personal service or instructional activity (e.g., providing hair cutting/styling, student instruction, or the like), the provision of such activity or service will be restricted to one customer at a time by appointment only.*

**Business Owner Information**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**Business Narrative:** \_\_\_\_\_

Business Name: \_\_\_\_\_

**To be used for Office only! (No outside signage or employees and no customer traffic!)**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Signature of applicant implies consent to any background checks deemed appropriate by this department**

**Application is hereby made for a Certificate of Occupancy for the use of the building, structure, or premises as identified and described herein. It is agreed that all the laws, ordinances and regulations enforced by the City of Biloxi, MS., shall be complied with in pursuit of obtaining this Home Occupation Use.**

<b>FOR OFFICE USE ONLY</b>	
Zoning Classification: _____	Parcel# _____
Approved by: _____	_____
Signature	Date
Comments: _____	