



1301 12<sup>th</sup> Street, Suite 103  
 Altoona, PA 16601  
 Phone (814) 949-2456

Fax (814) 949-2203  
 inspections@altoonapa.gov

	ALTOONA CITY BLAIR COUNTY
New Licenses Payable to: City of Altoona	<b>ONE-TIME \$25.00 FEE</b>

**DEPARTMENT OF CODES AND INSPECTIONS**

**APPLICATION FOR HOME-BASED BUSINESS**

**DOES YOUR PROPOSED HOME-BASED BUSINESS:**

- | YES                      | NO                       |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1) Receive and ship any goods, chattels, materials, supplies or items of any kind more than once a day?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 2) Receive and ship any goods, chattels, materials, supplies or items of any kind in a vehicle other than the resident's passenger vehicle or a parcel courier (i.e. Federal Express, UPS, etc.)?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 3) Have employees who do not reside in the dwelling?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 4) Have exterior or interior displays of goods which can be seen from a public right-of-way?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 5) Have a sign, lights, parking, or other evidence on the exterior of the building demonstrating that a business is being conducted inside?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 6) Have pieces of equipment or processes that create noise, vibration, glare, fumes, odors, visual or audio television or radio signal interference, or electrical interference which is detectable to normal senses in neighboring homes?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 7) Have a volume or type of any solid waste or sewage discharge generated which is not normally associated with residential use in the neighborhood?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 8) Use more than twenty-five percent of the ground floor area of the involved dwelling unit?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 9) Use garages, sheds, and other accessory structures?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 10) Use equipment or appliances other than those that are customarily used in common residences or offices?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 11) Conduct retail sales directly to customers on the premises in any fashion other than through the mail, telephone, or internet?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 12) Create a volume of traffic and a demand for parking spaces that is greater than would normally be expected in its neighborhood of Altoona?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 13) Store equipment, vehicles, and supplies related to the business on the property?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 14) Have off-street parking or loading berths beyond what is required for the involved residential dwelling?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 15) Will your business have any customers or clients at your house? Is it a nursery school, daycare center, tutoring or teaching service, dancing school, exercise or health center, funeral home, mortuary, eating or drinking establishment, animal kennel, animal hospital, veterinarian office, boarding house, medical or dental clinics or office, transportation vehicle repair or veterinarian office, boarding house, medical or dental clinics or office, transportation vehicle repair or rental facility or theater? |

**PLEASE INCLUDE AN EXPLANATION / DESCRIPTION OF THE BUSINESS:**

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I hereby certify that I am the person who completed this application and that the above information provided is true and correct to the best of my knowledge.

\_\_\_\_\_  
Resident and Business Owner

\_\_\_\_\_  
Date

**NOTARY PUBLIC**

Then personally appeared before me the above-named covenanter(s) and acknowledged the foregoing instrument to be his/their free act and deed. Attest:

\_\_\_\_\_  
Signature

Stamp:

Seal:

\_\_\_\_\_  
City of Altoona

\_\_\_\_\_  
Date

**Please contact the City of Altoona Department of Codes and Inspections at 814-949-2456 or [inspections@altoonapa.gov](mailto:inspections@altoonapa.gov) for questions on the completion of this form.**