



Planning & Zoning Department
502 E Tyler
Harlingen, Texas 78550
Phone: (956) 216-5101
Fax: (956) 216-5265

HOME OCCUPATIONS

DATE: ___/___/___

PROPERTY ACCOUNT NO.*: ___ - ___ - ___ - ___ - ___

PROPERTY LEGAL DESCRIPTION:
Subdivision Block Lot

BUSINESS NAME: _____

APPLICANT'S NAME:
Last First M.I.

BUSINESS ADDRESS:
Street Number and Name Ste/Apt No.
City State Zip Code

BUSINESS PHONE #: (____) ___ - ___ E-MAIL: _____

MAILING ADDRESS:
(if different from above) Street Number and Name Ste/Apt No.
City State Zip Code

DESCRIBE NATURE OF BUSINESS: _____

DAYS & HOURS OF OPERATION: _____ # OF ADULTS/CHILDREN: _____

ACKNOWLEDGEMENT AND AGREEMENT TO CONDITIONS

The foregoing is a true and correct description of the existing conditions and contemplated action and will have full authority over the operation and hereby agree to comply with all ordinances of the City and assume all responsibility for such compliance. I further agree to discontinue any violations of the conditions upon notice given to me or anyone in charge of the property by the Code Enforcement Officer.

APPLICANT'S PRINTED NAME _____

APPLICANT'S SIGNATURE _____ DATE _____

SIGNATURES MUST BE ORIGINAL
APPLICATIONS MAY NOT BE FAXED

*Property Account Number (a 16-digit number) may be obtained from the Cameron County Appraisal District online at www.cameroncad.org or via phone at (956) 399-9322.

PROPERTY ACCOUNT NO.: _____ - _____ - _____ - _____ - _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

Street Number and Name _____ Ste/Apt No. _____

City _____ State _____ Zip Code _____

**FOR CITY OF HARLINGEN OFFICE USE ONLY
DEPARTMENTAL REQUIREMENTS**

DEPARTMENT	REQUIRED CONDITIONS	SIGNATURE	DATE
Health Inspection	Complies with regulations		
Fire Inspection	Meet standard requirements		
Planning	Subject to Section 15.04 of the Zoning Ordinance		
Building/Electric/Plumbing	Permit #		
Other			

**A COPY OF THIS PAGE SHALL BE SUBMITTED TO THE PLANNING AND ZONING DEPARTMENT
ONCE ALL APPLICABLE SIGNATURES HAVE BEEN OBTAINED.**

HOME OCCUPATION AFFIDAVIT

BEFORE ME personally appeared _____ who, being first duly sworn, deposes and says that:

1. I affirm that the Home Occupation that I plan to operate will comply with the City of Harlingen Zoning Ordinance, more specifically Section 15.04, as amended;
2. I, or a member of my family, will carry the Home Occupation entirely in the home. No additional employees will be residing and/or working on the premises;
3. The use of the dwelling unit for a Home Occupation will not result in a change to the residential look of the structure.
4. There will be no signs advertising the Home Occupation or the type of services provided. I will only advertise my business by phone number and without the use of the physical address;
5. There will be no sales of goods on the premises;
6. The Home Occupation will not create obnoxious noise or other obnoxious conditions to the abutting residential property, such as odor, increased traffic congestion, light or smoke;
7. No hazardous chemicals shall be stored and/or used in the process of the Home Occupation;
8. If my Home Occupation is a child or adult day care establishment, I further affirm that:
 - a. I shall accommodate no more than six (6) children or adults;
 - b. I shall provide a screening fence in the rear yard of the property to keep children on the premises.
9. If my Home Occupation is a Foster Care Home or an Assisted Living Facility, I further affirm that no more than four (4) unrelated individuals (children and adults) will live in my home.

Further Affiant Sayeth Not.

Signature: _____
Home Occupation Owner

Print Name: _____

STATE OF TEXAS
CAMERON COUNTY

I HEREBY CERTIFY that on the _____ day of _____, 20____, before me, an officer authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared _____, who is personally known to me _____ or presented _____ as identification and who did/did not take an oath.

State of Texas

Print Name: _____

My Commission Expires: _____