Department of Planning & Community Development
Permit Processing 425-452-6800

Home Occupation Application and Decision

FOR OFFICE USE ONLY	07.118116LH	601345432
	Permit #	UBI #

Date 4.30.07 Applicant Ann B. McCombs, D.O.

Site Address 16236 SE 24th St. Phone Number 425/643-2373

Business Name ANN B. McCombs, D.O. P.S. Inc.

Business Description Holistic Medical Practice

A. Does your business have external indication of a commercial activity, including:

Yes	*No*	
☒	☐	nonresident employees
☒	☐	client visits
☒	☐	business-related deliveries
☐	☒	vehicle signage

If you answered *YES* to any of the above, continue to Section B. If you answered *NO*, a Home Occupation permit is <u>not</u> necessary. (Note: City of Bellevue and Washington State business licenses are all that is required to conduct this business from your place of residence.)

B. Please answer the following questions:

1. Does the business involve automobile-related service?	☐ Yes	☒ No
2. Does the business warehouse more than 1,000 cubic feet of materials?	☐ Yes	☒ No
3. Does the business include external storage of goods?	☐ Yes	☒ No
4. Is the business on the property but conducted outside the structure?	☐ Yes	☒ No
5. Does the business utilize more than 25 percent of the gross floor area of the structure in which it is located?	☐ Yes	☒ No
6. Does the business employ more than one person who is not a resident of the dwelling?	☐ Yes	☒ No
7. Has the dwelling's exterior been changed in a manner which would alter its residential character?	☐ Yes	☒ No
8. Has there has been an expansion of parking resulting from the business?	☐ Yes	☒ No
9. Is there any exterior signage of the business other than business signage on the applicant's vehicle?	☐ Yes	☒ No

10. Is there is any exterior storage of business-related material? ☐ Yes ☒ No

11. Is there any other exterior indication of the business? ☐ Yes ☒ No

12. Is there any structural alteration to either the interior or exterior which changes its residential character? ☐ Yes ☒ No

13. Is there use of electrical or mechanical equipment which changes the fire rating of the structure, creates visible or audible interference in radio or television receivers, or causes fluctuations in line voltage outside the building. ☐ Yes ☒ No

14. Is there any noise, vibration, smoke, dust, odor, heat, or glare produced by the business which exceeds that normally associated with a dwelling? ☐ Yes ☒ No

15. In addition to the two parking stalls required for the residents, are there more than two vehicles parked on or in the vicinity of the property at any one time as a result of the business? ☐ Yes ☒ No

16. Are there more than two deliveries per week either to or from the residence by a private delivery service or use of a commercial vehicle other than that normally used by the applicant or an employee? ☐ Yes ☒ No

17. Will there be more than six client visits per day ☐ Yes ☒ No

18. Will there be more than one client on the premises at any one time? ☐ Yes ☒ No
The definition of "one client" does include a family member arriving in a single vehicle.

If you answered *YES* to any of the above questions, a Home Occupation permit cannot be approved by the city. The proposed business should be relocated in a commercial district.

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. I further agree to comply with all city codes and regulations related to this home-based business.

Ann B. McCombs, D.O.
Business Owner Name (Please Print)

4.30.07
Date

Ann B. McCombs, D.O.
Business Owner Signature

C. In addition to this application, submit 2 copies of a site sketch on an 8 ½ " x 11" paper or pick obtain an aerial map at the Land Use desk in Development Services. Show and label the following items:

1. property lines
2. street(s)
3. driveway and/or parking area
4. business entry