Development Services
Permit Processing 425-452-4898

Home Occupation Application and Decision

FOR OFFICE USE ONLY	09 130044 LH	
	Permit #	UBI #

Date 11/13/09 Applicant UDAY K. MEHTA, MD

Site Address 12648 N.E. 4th St. Phone Number 425-830-5492

Business Name UDAY K. MEHTA, MD.

Business Description SMALL MEDICAL PRACTICE "MICRO PRACTICE"
Family 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 sto , 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 thank 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.

This site is already approved for Adult Family Home. Thank you

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.

UDAY K. MEHTA
Business Owner Name (Please Print)

11/13/09
Date

Uday K Mehta
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

To ... mpleted by City of Bellevue staff

Permit Number 09-130044-LH Planner Leah Chulsky

Public notice in the ~~King County Journal~~ Seattle Times on 12/3/09
Property owners within 500 feet of the subject property were also notified via mail on this date.

Located in Community Council area ☒ No ☐ Yes – Meeting attended on _____

Comments received 9 ☐ None

Comments summary (describe)
- Type of medical practice
- Number of client visits
- Hours of operation
- Number of vehicles

City Response
The type of medical practice is family medicine. This off will be for consulting. There will be no more than six visits between the hours of 10am - 5pm monday thru friday. no more then one vehicle for the business onsite at a time.

Further staff review (LUC 20.30N.150.B)

If deemed necessary, the business has been inspected by the Bellevue Fire Department, and the applicant commits to implement all required corrective measures within the stated time period.	
The location of the proposed home occupation in relation to traffic impacts and safety concerns to the adjacent neighborhood.	
The impacts the proposed home occupation may have on the residential character of the neighborhood.	
The cumulative impacts of the proposed home occupation in relation to other city-approved home occupations in the immediate vicinity.	**1** address _____ permit # _____ business description _____ **2** address _____ permit # _____ business description _____ **3** There are no city-approved HO permits in the vicinity ☐

Decision (circle one) Approve with conditions (list any conditions below) Deny

* no more than 6 client visits per day
* Hours limited to 10am - 5pm monday thru Friday.
* no more then on vehicle is allowed onsite at a time from clients.

Leah Chulsky
Planner Signature

1/11/10
Date

The applicant may commence the business activity 20 calendar days following the date on which the final decision was mailed or the registration was approved. If the decision is appealed, the applicant may not begin operation of the business.

The Department of Development Services may review this Home Occupation Permit in one year to determine if all of the above conditions have been met. If the city receives complaints from residents in the area and it is determined the business has not complied with all of the above regulations, this approval may be modified or revoked at any time if there are documented violations.