

City of Taylorsville

Community Development Department
2600 West Taylorsville Boulevard
Taylorsville, Utah 84129
Phone: (801) 963-5400 Fax: (801) 955-2052
www.taylorsvilleut.gov



HOME OCCUPATION APPLICATION

Home Occupation Type: Class A Class B Class C Class D

Application For: New Business Change of Ownership New Location

Business Name: _____
(Please Attach Copy of Business Name Registration from the Utah Department of Commerce)

Business Owner: _____

Business Location: _____
(Street Address - No P.O. Boxes)

(City) (State) (Zip)

Phone: _____ Email: _____

Ownership Type: Sole Proprietor Partnership Corporation LLC

If Corporation, List Corporation Name: _____

Property Owner Information (if Different):

Name: _____ Phone: _____

Address: _____

Email: _____

Utah State Sales Tax #: _____

Is a Tenant Finish or Building Remodel Proposed for this Business? Yes No

Estimated Starting Date: _____ Hours of Operation: _____

What parts of your home will be utilized with this Home Occupation?

What machinery/equipment will be used with this Home Occupation?

Detailed Nature of Business: _____

This form is an application for a business license only. Please note that the completion of the business license application and payment of all applicable fees does not constitute approval to operate a business. Business operations may commence only after all applicable approvals have been given and a business license has been issued. Operating a business without an approved business license constitutes a criminal violation.

I, _____, hereby agree to conduct said business strictly in accordance with all Taylorsville City Codes governing such businesses
(clearly print or type name)
and swear under penalty of perjury, that I have examined the information contained herein and to the best of my knowledge and belief, it is true, correct, and complete.

Signature: _____ Date: _____

Office Use Only	
Date Received:	_____
City ID #:	_____
Receipt #:	_____
Code #:	_____
License Category:	_____
Base Fee:	\$ _____
Disproportionate Fee:	\$ _____
Other _____:	\$ _____
Total:	\$ _____
Planning Division Review	
Zoning Designation:	_____
Parcel #:	_____
Land Use:	_____
<input type="checkbox"/> PU <input type="checkbox"/> AC <input type="checkbox"/> NC <input type="checkbox"/> Non-Permitted Use	
Reviewed By:	_____ Date: _____
Approvals:	
Fire:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Initials:	_____ Date: _____
Code Enforcement:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Initials:	_____ Date: _____
Building:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Initials:	_____ Date: _____
Health:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Initials:	_____ Date: _____
Comments:	_____ _____ _____

FOR YOUR INFORMATION...

For more information regarding Home Occupation business licenses, please refer to Taylorsville City information forms **L-2 Class A Home Occupations (home office only); Class B Home Occupations (no customers to home); or Class C Home Occupations (customers to home)**; available from the Taylorsville Community Development Department at Taylorsville City Hall or www.taylorsvilleut.gov.