

STAFF USE ONLY  
GL: 103413100 Dist. Code: 312  
FEE:  
Class 2 Staff Review: **\$150**  
Class 3 Planning Commission Review: **\$500**



SARATOGA  
SPRINGS  
PLANNING

*Applications submitted before 12:00 p.m. on Tuesday will be discussed at an internal Development Review Committee (DRC) meeting on the following Tuesday. First round of comments anticipated complete after 10 business days.*

**HOME OCCUPATION APPLICATION  
UPDATED AUGUST 2023**

**BUSINESS NAME:** \_\_\_\_\_

**Applicant / Authorized Agent:** \_\_\_\_\_

Address of home occupation: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Property Owner (if different):** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

Hours/Days of Operation: \_\_\_\_\_ Number of non-family employees: \_\_\_\_\_

Total Square footage of the residence: \_\_\_\_\_ Sq. ft. occupied by the occupation: \_\_\_\_\_

**Check applicable box:**

- Single family dwelling
- Multi-family dwelling (condo, townhome, other attached unit)
- IADU (internal accessory dwelling unit, i.e. basement apartment)

Please describe the proposed Home Occupation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Home Occupation Application Process

Home Occupations may be applied for in accordance with [Chapter 19.08 of the Land Development Code](#) or click [HERE](#) to review the requirements.

## **FOR DAYCARE/PRESCHOOL FIRE & RESCUE REQUIREMENTS SEE:**

<HTTPS://WWW.SARATOGASPRINGS-UT.GOV/192/HOME-OCCUPATION-DAYCARE-PRESCHOOL-REQUIREMENTS>

**Review the relevant code** and provide the items in the checklist(s) below.

Email the completed & signed application and all required application materials to [Planning@SaratogaSprings-UT.gov](mailto:Planning@SaratogaSprings-UT.gov). Questions may be directed to 801-766-9793 x155.

**Review Fee:** Application materials will be initially reviewed for completeness. When deemed complete, the application will be accepted and then the review fee can be paid by check or credit/debit card.

Checks can be delivered to:

City of Saratoga Springs  
Attn: Planning Department  
1307 N Commerce Dr., Suite 200  
Saratoga Springs, UT, 84045

To pay by card, call 801-766-9793 x 155. Convenience fees may apply.

**The application cannot be officially reviewed until the fees are received.**

In an effort to provide the best service and most efficient review of your application, no Planning application will be accepted unless the application is determined to be complete, containing all items on the application checklist(s).

Applications will be routed for review the first business day after they are accepted. After being routed, most applications will receive a response within 10-12 business days. A Comment Review Meeting (CRM) may be requested after comments are sent to the applicant. Reviews for large projects or those with complex circumstances may require additional time; in these instances the City will notify the applicant of the extended review period.

**IF APPLICABLE:**

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Number of classes or sessions per day: \_\_\_\_\_ Number of students per day: \_\_\_\_\_

Number of students per class: \_\_\_\_\_

## Planning Checklist Items

Applicant	City	<i>Check or initial the applicable boxes to indicate the items have been included or the application will not be accepted.</i>
		1. <b>Business Name:</b> _____
		2. <b>Sketches.</b> The applicant must provide a sketch drawn to scale of: the floor plan of the home, area to be devoted to the occupation and off-street parking.
		3. <b>Professional Licenses.</b> If applicable, the applicant must submit a copy of professional licenses to legitimize the home occupation.
		4. <b>Fire Extinguishers.</b> Evidence of the proper extinguisher required by the Fire Code.
		5. <b>Signage.</b> If any, the applicant must submit a sketch of the proposed signage and identify the location of the signage.

**Disclaimer:** Please consult current ordinances, including State and City codes, and other legal precedents for applicable law. This application will be subject to any and all valid laws in place at the time a complete application meeting all city ordinances is submitted with all application fees paid.

**APPLICANT ACKNOWLEDGMENT:**

**I hereby certify that I have read the information contained in this application form and that I have provided the required application materials.**

Applicant's Name: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICANT CERTIFICATION:**

I certify under penalty of perjury that this application and all information submitted as a part of this application are true, complete and accurate to the best of my knowledge. I also certify that I am the owner of the subject property and that the authorized agent noted in this application has my consent to represent me with respect to this application. Should any of the information or representations submitted in connection with this application be incorrect or untrue, I understand that the City of Saratoga Springs may rescind any approval, or take any other legal or appropriate action. I also acknowledge that I have reviewed the applicable sections of the Saratoga Springs Land Development Code and that items and checklists contained in this application are basic and minimum requirements only and that other requirements may be imposed that are unique to individual projects or uses. Additionally, I agree to reimburse the City of Saratoga Springs all amounts incurred by the City in excess of the base fee required by the Consolidated Fee Schedule to review and process this submitted application and agree to comply with Resolution No. R 08-21 and R 11-22. I also agree to allow the Staff, Planning Commission, or City Council or appointed agent(s) of the City to enter the subject property to make any necessary inspections thereof.

Property Owner's Name: \_\_\_\_\_

Property Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_