WAKULLA COUNTY
PLANNING & COMMUNITY DEVELOPMENT
3093 Crawfordville Highway • Crawfordville, FL 32327 • 850/926-3695
Fax – 850/926-1528 • email: wakullaplanning@mywakulla.com

REQUEST FOR HOME OCCUPATION

Tax ID:

Name: _____

Address: _____

Telephone: _____

Directions to Home: _____

_____

Description of Home Occupation and Equipment to be Used: _____

_____

_____

Total Heated Square Feet in Home: _____

Square Feet to be Utilized by Home Occupation: _____

Employees: **Name:** **Address:**

_____

_____

_____

Site Plan Attached: _____**Yes** _____ **No**

Name and Addresses of Property Owners within 500 Feet of your Property Lines (attach list).

I certify that the above information is true and correct to the best of my knowledge and belief.

_____ _____
Signature of Owner **Date**

_____ _____
Signature of Owner **Date**

Fee Paid: $515.00 **Received by:** _____
Receipt #: _____ **Date:** _____

Revised 9/24/10