



**Town of Canton**  
**Building Department**  
**Home Occupation / Business Form**

*Applicant Information*

Applicant Name \_\_\_\_\_ Date \_\_\_\_\_  
Address \_\_\_\_\_ Telephone No. \_\_\_\_\_  
Address of occupation / business (if different) \_\_\_\_\_  
Are you the owner or tenant?  Owner  Tenant  
*If tenant, please provide letter of acknowledgment from owner*

*Occupation / Business Information*

Type of occupation / business \_\_\_\_\_  
D.B.A. \_\_\_\_\_  
Please provide a brief description of what is involved in the operation of the occupation / business. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Will this occupation / business be secondary to the main use?  Yes  No  
Number of employees (including yourself) ? \_\_\_\_\_  
Will there be storage of materials, equipment or product on the premises?  Yes  No  
If yes, please specify type, storage location and quantity. \_\_\_\_\_  
\_\_\_\_\_  
Will there be deliveries made to the premises?  Yes  No  
If yes, please specify type of deliveries and frequency. \_\_\_\_\_  
\_\_\_\_\_  
Will there be customers / clients visiting the premises?  Yes  No  
If yes, please specify number of customer / clients and frequency. \_\_\_\_\_  
Will there be any signage advertising occupation / business?  Yes  No  
If yes, will this sign be affixed to the house or be supported by a post / pole?  Affixed  Supported  
*Please specify size of sign and the wording to be used.*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Signature of Applicant

*Office Use Only*

Denied  Approved Date \_\_\_\_\_  
Reason for denial \_\_\_\_\_  
\_\_\_\_\_  
Signature of Building Official