

TOWN OF LEICESTER

3 Washburn Square
Leicester, MA 01524
Phone: (508)892-7003 Fax: (508)892-1163
Building & Zoning Enforcement
Jeff Taylor

Plumbing & Gas Inspector John P. Dolen

> Wiring Inspector John A. Markley

APPLICATION/ZONING PERMIT FOR HOME OCCUPATION

The undersigned hereby applies for a permit to operate a home occupation under Section 1.3.06 of the Leicester Zoning Bylaws.

PLEASE PRINT	
Name:	Phone:
Location of Home Business:	
Owner of Property:	
	Type of: Business
# of Employees: # of	f Commercial Vehicles:
# of Commercial Vehicles Parked Outdoors:	Garaged:
Type of Material Used:	
Storage of Materials (locations):	
Where will Occupation be conducted? Home:	
Accessory Build	ling:
I agree to conform to the Home Occupation Bylav this permit, if granted.	w of the Town of Leicester under penalty of forfeiture of
Signature:	Date:
******************	**************************************
Approved: Permit #:	Fee:
Denied:	
Signature	Data

Zoning Enforcement Officer