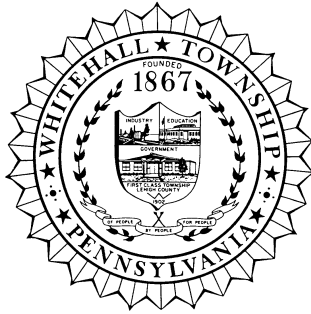


Whitehall Township



HOME OCCUPATION GUIDELINES



Revised MARCH 2023

So, you want to have a business out of your home. The following is a guide as to the process in which you must follow prior to establishing your home occupation. Depending on the business in which you would like to conduct out of your home, you may need to go through the Special Exception process, or you may simply need to complete a Business Privilege License Application and Zoning Certification Form (Examples attached) prior to the startup of your home occupation.

Since it is impossible to name all the possible home occupations, this guide will help answer some questions you may have.

While there are many different types of home occupations, the following uses require a Special Exception application in the R-1, R-2, R-3, R-3A, R-4, R-5, R-5A, and R-6 Zoning Districts:

1. Single operator barber shop as in home occupation
2. Single operator beauty shop as in home occupation
3. Day Care Center **

** Note – There are 3 types of Day Care centers: 1) Family Daycare; 2) In Home Group Care; and 3) Day Care Center (A separate Guide is available for Daycare Centers)

If you are planning on one of these businesses, please complete the application for a Special Exception.

As always, should you have any questions, please contact the Zoning Officer at (610) 437-5524, Ext. 1155.

Please know all information, forms and permits can be found on the Township's website at www.whitehalltownship.org.

DEFINITIONS

HOME OCCUPATION: Any use conducted entirely within a dwelling unit by members of the family residing therein, which is clearly incidental and secondary to the residential use of the dwelling, does not change the residential character thereof, does not emit any sound or noise discernible outside of the dwelling unit and does not occupy more than 250 square feet of the total above-ground floor area of the building or structure in which the home occupation is situated. The term "home occupation" shall include, but shall not be limited to, hand crafts, cooking, individual music instruction, tutoring, dressmaking, laundering, millinery, photography studio and office or studio in the residence of an artist, lawyer, architect, engineer, teacher, accountant, musician, or other similar professional. The term "home occupation" shall specifically not include a photography processing laboratory, music school, dance school, or school of any kind with organized classes, or the office of a physician, surgeon, dentist, or veterinarian.

NO IMPACT HOME-BASED BUSINESS: A business or commercial activity administered or conducted as an accessory use which is clearly secondary to the use as a residential dwelling and which involves no customer, client, or patient traffic, whether vehicular or pedestrian, pickup, delivery, or removal function to or from the premises, in excess of those normally associated with residential use. The business or commercial activity must satisfy the requirements as set forth in Section 10 of the Zoning Ordinance.

PERMITS REQUIRED

- A Whitehall Township Business Privilege License - \$35.00 Annual Fee.
- Whitehall Township Zoning Certification Form – No Fee.
- Use Application and Permit – \$25.00 - for No impact Home Based businesses, \$50.00 for Residential Impact Home occupation.
- Special Exception process (for beauty/barber shops & Day Care Centers) – Fee – please refer to Special Exception Application.
- You must also contact the Whitehall Township Tax office at (610) 437-5524, Ext. 1167 regarding garbage use for your business.

REGULATIONS

Home Occupations considered as accessory uses shall:

- Be limited to 1 per residential dwelling.
- Be conducted only by residents of the dwelling in which the use is situated. Not more than 1 non-resident employee shall be permitted at sites only where at least 2 off-street parking spaces are available.
- Not exhibit any external characteristics or evidence of their existence. Signs shall be as allowed by otherwise applicable laws, regulations or permits and shall be limited to 1 non-illuminated wall sign having a maximum sign display area of 2 square feet.
- Only be conducted in a principal residential structure or, if permitted by special exception, in an accessory building or structure, such as a garage, barn or storage structure. If a new structure is to be erected, then the exterior design of the new structure shall reflect the principal residential use of the structure.
- Not occupy more than 1 building or structure.
- Not occupy more than 250 square feet of the total above ground floor area of the building or structure in which the home occupation is situated.
- Not exhibit any nuisance characteristics such as dust, noise discernible beyond the property line, odor, smoke, or fumes or be detrimental to the general public health, safety, and welfare.
- Shall not have more than 2 vehicles at any given time patronizing the business.
- Not require or need any additional parking spaces.

NO IMPACT HOME BASED BUSINESSES - Those businesses or activities which meet the definition of “No Impact Home Based Business” shall be a permitted use in all Residential, C-1, C-2A and OS-1 Zoning Districts; shall not be subject to the issuance of a Use Application and Permit provided that the following criteria are met:

- The business activity shall be compatible with the residential use of the property and surrounding residential uses.
- The business shall employ no employees other than family members residing in the dwelling.
- There shall be no display or sale of retail goods and no stockpiling or inventory of substantial nature.
- There shall be no outside appearance of a business use, including, but not limited to, parking, signs, or lights.
- The business activity may not use any equipment or process which creates noise, vibration, glare, fumes, odors, or electrical interference, including interference with radio or television reception, which is detectable in the neighborhood.
- The business activity may not generate any solid waste or sewage discharge, in volume or type, which is not normally associated with residential use in the neighborhood.
- The business activity shall be conducted only within the dwelling and may not occupy more than 25% of the habitable floor area.
- The business may not involve any illegal activity.

FEE \$35.00 per year **NON-REFUNDABLE**

TOWNSHIP OF WHITEHALL

Invoice # _____

Made payable to Whitehall Township

BUSINESS LICENSE APPLICATION

3221 MACARTHUR ROAD WHITEHALL, PA 18052
whitehalltaxoffice@whitehalltownship.com

THE FOLLOWING INFORMATION IS NECESSARY FOR OUR RECORDS AND WILL BE HELD IN THE STRICTEST CONFIDENCE.
ALL QUESTIONS MUST BE ANSWERED FULLY.

ZONING CERTIFICATION MUST BE SUBMITTED ALONG WITH THIS APPLICATION.

Please Print Legibly

Business Name		FEDERAL EIN or TAX ID		ASSIGNED BUSINESS PRIVILEGE ACCOUNT NO: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Business / Local Address				
Street	City	State	Zip Code	
Mailing Address (if other than above)				
Street	City	State	Zip Code	
Name of Owner or Contact		Owners Address		
Business Phone No.	Owner or Contact Phone No.	Treasurer's Stamp		
Email	Fax No.			
Describe Nature of Business ---				

SHADED AREA FOR OFFICE USE ONLY

Partners or Officers Names and Addresses

CHECK ONE:

License Renewal	<input type="checkbox"/>	License New	<input type="checkbox"/>	Date Operations Began in our Taxing District if New:
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I _____ **certify that all information and statements herein are true and correct.**
Name of Person or Firm Keeping Books

Date

Signature

Title

ORDINANCE 1638

SECTION V: BUSINESS LICENSE. After the effective date of this Ordinance, any person desiring to conduct, or continue to conduct any business, as herein defined, within the Township of Whitehall shall file with the Treasurer an application for a Business Privilege License and shall pay Thirty-Five Dollars for the initial license and Thirty-Five Dollars for each renewal thereof. The License issued shall be conspicuously posted in the place of business for which the such license is issued and shall remain in effect for the license year or fraction of year for which said license was issued. In cases where more than one place of business is conducted, a separate license shall be issued for each place of business. Any taxpayer who is in default in payment of tax due hereunder shall be refused a license until such tax is paid in full.



Whitehall Township Zoning Certification

DATE _____

License Year _____

This form **MUST** be completed in its entirety prior to the issuance of **ANY** business privilege license whether business is located in Whitehall Township or not. There is NO fee for the zoning certification form.

BUSINESS NAME – COMPLETE AS IT APPEARS ON YOUR WHITEHALL TOWNSHIP BUSINESS LICENSE

MAILING ADDRESS (Must include street address) _____

CONTACT PERSON and PHONE # _____

FAX # _____ EMAIL _____

SITE ADDRESS / JOB SITE LOCATION _____

NATURE OF BUSINESS (Check One):

- RETAIL CONTRACTOR RESTAURANT OFFICE
- LANDLORD - (LIST ALL RENTAL ADDRESS(ES) and COMPLETE **REVERSE SIDE**)
- _____
- OTHER _____

**ANY BUSINESS LOCATED IN WHITEHALL TOWNSHIP
MUST ANSWER THE FOLLOWING QUESTIONS: It is your responsibility to
provide and retain the following necessary information to the Township**

NUMBER OF YEARS BUSINESS OPERATING AT THIS LOCATION _____

HOW LONG HAVE **YOU** BEEN OPERATING AT THIS LOCATION? _____

NUMBER OF EMPLOYEES AT THIS LOCATION _____

NUMBER AND TYPE OF BUSINESS VEHICLES STORED AT THIS LOCATION _____

USE PERMIT # (required) _____

DATE OF **TOWNSHIP** CERTIFICATE OF OCCUPANCY _____

IF THIS IS A HOME OCCUPATION LIST ANY OTHER BUSINESSES AT THIS LOCATION

PLEASE DO NOT WRITE BELOW THIS LINE

ZONING DISTRICT _____ USE PERMIT APPLICABLE Y / N N/A ---- HO NIHO

APPROVED _____

FOR INFORMATION REGARDING THIS FORM,
PLEASE CONTACT **THE ZONING OFFICER** AT 610-437-5524, EXT 1155

**FOR INFORMATION REGARDING YOUR BUSINESS LICENSE,
PLEASE CONTACT THE TREASURER'S OFFICE AT 610-437-5524, EXT 1143**

** Please retain copy of form for your records **

**TOWNSHIP OF WHITEHALL
USE APPLICATION AND PERMIT**

(as required by Township Zoning Ordinance and Amendments thereto)

USE PERMIT NO.: _____

DATE ISSUED: _____

610-437-5524 Ext. 1155

This form MUST be filled out and signed by a representative of the proposed business or tenant.

A. LOCATION, OWNERSHIP & PRESENT USE OF PROPERTY:

- 1. Site Address _____
- 2. Property Owner _____
- 3. Property Owner Address _____
- 4. Property Owner Email _____ Phone _____
- 5. Present Use of Structure/Land _____
If residential - Number of families _____

Application is hereby made for a permit to use the premises for the purposes described herewith. The information which follows, together with location diagram, is made part of this application by the undersigned. It is understood and agreed by this applicant that any error, misrepresentation of material fact, either with or without intention on the part of this applicant, such as might or would operate to cause a refusal of this application, or any change in the location, size or use of structure or land made subsequent to the issuance of this permit, without approval of the Zoning Officer, shall constitute sufficient ground for the revocation of this permit. All statements made herein are true and correct and all supporting documents hereto are true and correct and will be adhered to in every respect.

B. PROPOSED USE OF STRUCTURE AND/OR LAND:

- 1. Type of Work (**Check one**): Change of use in existing structure _____ Change of ownership of existing business _____ Home Occupation _____ Kiosk/Cart _____ In-Line Store _____ OTHER _____
- 2. Proposed Use of Structure/Land _____
If residential - Number of families _____
- 3. Proposed Business Name _____
- 4. Nature of Business (Explain) _____
- 5. Business Email _____
- 6. Business Website Address _____
- 7. Number of Employees _____ Number of Company owned vehicles _____

C. OWNER OF BUSINESS:

- 1. Applicant Name _____ Phone _____
- 2. Applicant Mailing Address _____
- 3. Applicant Email _____

D. Certify that all information contained in Sections A, B & C are correct and will be adhered to:

Applicant's Signature _____
Print Name _____

FOR HOME OCCUPATIONS - If Applicant is not the property owner, certification must be provided evidencing property owner's permission for application to be made in the form of a signed, notarized statement.

FOR OFFICE USE

REFERENCE: Plan is attached hereto: Yes _____ No _____ Transfer of original Use Permit No. _____

APPROVAL & DATES OF ACTION TAKEN:

- 1. Application Approved: Yes _____ No _____ Date _____ Zoning District _____
Zoning Officer _____
Conditions of Approval _____
- 2. Reason for DENIAL of Application _____

NOTE: This permit applies to USE only and shall not relieve applicant from obtaining such other permits as may be required by law. NOTICE: Violation of any provision of this ordinance by any owner or lessee or other person shall constitute a violation of Whitehall Township zoning ordinance and appropriate enforcement will ensue.

- COMMERCIAL FEES:** (Must include parking plan. If RESTAURANT, include seating plan AND parking plan)
- Temporary Use (per event): \$1,000.00
 - Commercial /Industrial / All Others: \$250.00
 - Kiosk / Cart within existing enclosed retail areas: \$75.00
 - Transfer Fee: 25% of original fee

- RESIDENTIAL FEES:**
- No Impact Home Occupation: \$25.00
 - Impact Home Occupation: \$50.00
 - Family Day Care: \$50.00