

AN ORDINANCE OF THE CITY OF SMYRNA, GEORGIA PROVIDING THAT THE CODE OF ORDINANCES, CITY OF SMYRNA, GEORGIA, BE AMENDED BY REVISING SECTION 505.18 OF SAID CODE, PROVIDING THAT THE NEW SECTION 505.18 BE INCLUDED IN THE CODE OF ORDINANCES. BE IT ORDAINED BY THE MAYOR AND COUNCIL OF THE CITY OF SMYRNA, GEORGIA:

That Section 505-18 of the Code of Ordinances of the City of Smyrna, Georgia be amended so that such section shall read as follows:

Home Occupation License may be issued from the Business License Office without requiring the applicant to appear before the Mayor and Council, restricted to the following classes: computer work, typing, bookkeeping, small arts and crafts and telephone use.

Before issuance of a Home Occupation license, the applicant must meet the following conditions:

1. To operate a business from an apartment, the City will need a letter of approval from the owner, not the manager.
2. To operate a business from a home, a letter of notification with signatures affixed of all homeowners within a three hundred- foot radius of the subject property. If this is rental property, a letter of approval is also required from the property owner.
3. Certificate holder will be the only person to work from this location.
4. There shall be no inventory maintained on the premises.
5. Applicant must certify there will be no outside storage of business related items of any kind.
6. Applicant must certify there will be no traffic generated by the business of any kind (example: vehicles or people).
7. Applicant must certify there will be no signs or advertisement of any kind at this location.
8. Business license will be granted on a calendar year basis for one year only, subject to renewal by the business license office, providing there has been no violation of the Home Occupation Ordinance of any kind.
9. Applicant agrees that any violation of the conditions stated above will render the license null and void.
10. The fee for a home occupation business license shall be equal to the regular business license in the category most similar to the occupation.
11. No retail sales of any kind.

Please note! This PDF file is a fillable form that you can complete online in your web browser or in Adobe Acrobat Reader. Once you complete the form, print a hard copy for submission to the City of Smyrna.

HOME OCCUPATION BUSINESS LICENSE APPLICATION

City of Smyrna, 3180 Atlanta Rd, Smyrna, GA 30080

(678) 631-5321

Fax (770) 431-2808

Name of Business: _____

Applicant: _____

Business Address: _____
(Street) (City) (Zip Code)

Mailing Address: _____
(Street) (City) (Zip Code)

Type of Business: _____

Telephone Number: Home () _____ **Business** () _____

Social Security Number or EIN: _____ **Date of Birth:** _____

Email: _____

1. Do you own the property: Yes No If you do not own the property give the owner's name and address:

2. Number of Employees: _____ Will there be exterior evidence of the home occupation:
Yes No _____
3. Will the operation of this business require internal or external alterations inconsistent with the residential use of the business: Yes No _____
4. Will accessory buildings or outside storage of material and/or equipment be used in connection with this business:
Yes No _____
5. Will the home occupation require more than twenty-five percent (25%) of the total floor area of the dwelling:
Yes No _____
6. Will vehicles, other than those used primarily as passenger vehicles, be used in connection with this home occupation:
Yes No _____
7. Will there be on-street parking of customer vehicles or general contact with the public, other than by telephone:
Yes No _____
8. Will there be chemical, electrical, or mechanical equipment, including equipment that interferes with radio and/or television reception, installed or used except that which is normally used for household or hobby purposes:
Yes No _____
9. Will there be any group instruction, assemblies or activities on the property in connection with this home occupation:
Yes No _____

I, _____, do hereby swear and affirm that I have read, understand and agree to abide by the Home Occupation Business License Ordinance as set forth in the City of Smyrna Code of Ordinances. Further, I understand that failure to abide by the referenced ordinance will result in the revocation of said home occupation license.

Signature of Applicant

Date

THE OCCUPATION TAX CERTIFICATE WILL NOT BE ISSUED OR RENEWED WITHOUT COMPLETION AND NOTARIZATION OF THIS FORM!

Affidavit of Compliance with O.C.G.A. 50-36-1 “Verification of Lawful Presence within the United States.”

O.C.G.A. 50-36-1 requires that applicants applying for such things as licenses for public benefits complete a signed and sworn affidavit verifying the applicant’s lawful presence in the United States. Therefore, the applicant must answer the following questions:

The applicant is a United States citizen or legal permanent resident at least eighteen (18) years old.

YES

NO

IF NOT:

The applicant is a qualified alien or nonimmigrant under the federal Immigration and Nationality Act, Title 8 U.S.C., as amended, at least eighteen (18) years old, and is lawfully present in the United States. *A photo static copy of the applicant’s alien card issued by the Department of Homeland Security or other federal immigration agency must be included with this document.*

O.C.G.A. 50-36-1 states that “Any person who knowingly and willfully makes a false, fictitious, or fraudulent statement of representation in an affidavit executed pursuant to this Code section shall be guilty of a violation of Code Section 16-10-20.”

I declare, under penalty of law, that this affidavit has been completed by me and is true and correct.

Signature

Title

Date

(Must be signed by applicant. If the applicant is a corporation, must be signed by an officer of the corporation. **A STAMPED SIGNATURE IS NOT ACCEPTABLE.**)

I hereby certify that _____ is personally known, or verified by me, that the applicant signed this application after stating to me his or her personal knowledge and understanding of all statements and, under oath actually administered by me, has sworn that the statements and answers contained in this affidavit are true.

This _____ day of _____, 20__

Notary Public

AFFIX SEAL

All applicants must attach a copy of a secure and verifiable document as defined in O.C.G.A. 50-36-2. Such documents include a valid Georgia issued Driver’s License or ID Card, a valid Driver’s license issued by another State or an identification document issued by the United States Government.