

Department of Planning & Zoning 25 West Market Street, Leesburg VA 20176 (703) 771-2765 / Fax (703) 771-2724 www.Leesburgva.gov/Planning

HOME OCCUPATION PERMIT:

TLHO_____--__

	Revised October 2019	
FEE: \$30.00		
Business Name:		
Address:		
	ss of the property, the home occup	om the owner of the dwelling must be provided. The owner's consent pation use requested by the applicant, and the owner's approval to
Applicant's Name:		Owner's Name:
Applicant's Phone Numbe	r:	Owner's Address:
Applicant's Email:		
Description of Home Occup	pation:	
Location in the Home (roo	m):	Square Footage:
Leesburg Zoning Ordinance zoning districts pursuant to T take the place of other licens Violation of the conditions	(TLZO) Section 9.4.3.E <u>Use Li</u> LZO Sec. 11.5.2 <u>Trucks Parked</u> tes that may be required by Lav	ocation of this Home Occupation Permit pursuant to TLZO
Applicants Signature:		Date:
Subdivision:	PIN:	Zoning District:
	ed hereon, and any additional re	own of Leesburg Zoning Ordinance (TLZO) Section 9.4.3.E <u>Use</u> easonable conditions pursuant to TLZO Section 9.4.3.B
Additional conditions of ap	proval:	
Zoning Adı	ministrator/Designee	 Date