



Business License Application

License Fee (New & Renewal): \$25.00

Note: Fee to be paid at the time license is issued.

Licenses will not be issued the same day as application receipt.

(Section 5.32.030 of the PFMC requires all business within the city limits have a business license)

New  Renewal  Change in Information

Commercial Location  Residential Location

\*Home Occupation Standards on pages 2-3 must be reviewed and signed.

Business Name: \_\_\_\_\_ Zoning: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Type of Business (brief description goods/services to be sold/provided): \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact E-mail: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Website: \_\_\_\_\_ Date Business Est.: \_\_\_\_\_

Business Owner (if different than contact): \_\_\_\_\_

Emergency Contact (primary local person): \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Emergency Contact (secondary local person): \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Alarm Company: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Note type of alarm(s) with which the business is equipped:  Fire  Intrusion  Other \_\_\_\_\_

Number of Employees: FT \_\_\_\_\_ PT \_\_\_\_\_ Days of Operation: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_

Property Owner/Manager Name (if leasing or renting): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Applicant Signature

Date

Print Name

**Building and Site Information** (Required for all commercial locations.)

Square footage of building or tenant space: \_\_\_\_\_ Square footage of lot: \_\_\_\_\_

Proposed primary and secondary activity and approx. sq. ft. for each use: \_\_\_\_\_  
\_\_\_\_\_

Number of on-site paved parking spaces provided: \_\_\_\_\_

What was the prior use of the building/tenant space and business name if known? \_\_\_\_\_

Are there fire sprinklers in the building?  Yes  No

Where is the location of the closest fire hydrant? \_\_\_\_\_

Are there adjacent businesses and, if so, what are they? \_\_\_\_\_  
\_\_\_\_\_

Will chemicals or liquid or semi-liquid products be used or generated?  Yes  No

Does the building have a grease trap, sand/oil separator or other liquid waste treatment device?

Yes  No  Don't Know

Will a waste discharge other than normal domestic sewage occur?  Yes  No

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**Home Occupation Performance Standards and Agreement** (Required for all home occupation businesses)

All home occupations shall comply with the following standards:

- The home occupation must be clearly subordinate to the primary residential use. Not more than one third (1/3) of the floor area of the residence may be used for the home occupation.
- No outside storage of goods, equipment or materials related to the home occupation shall be permitted.
- No home occupation shall create a need for parking or traffic beyond that required for the single-family residential use, or create noise, dust, vibration, odor, smoke, glare, electrical interference, fire hazard or nuisance beyond that caused by typical single-family residential occupancy in a residential neighborhood.
- There shall be no change in appearance that would alter the residential character of the neighborhood.
- Signage requirements for home occupations are to be consistent with [chapter 18.36](#).
- A permitted home occupation shall have no more than one full-time employee equivalent who is not a family member on the premises.
- Employees (other than the resident and one employee) of a permitted home occupation, may not work, gather, park, or meet, at the residence of a home occupation on a regular or frequent basis.
- A home occupation must be fully enclosed within the residence or an approved accessory building.
- Home occupation daycare shall provide care to no more than five (5) children at any time, including those requiring daycare and residing on the premises.

**Note:** *Business activities being conducted out of a residence may be subject to requirements of Federal Americans with Disabilities Act Accessibility Guidelines.*

**Post Falls Home Occupations**

Certain limited business or professional uses may be conducted as a home occupation within a residence (and/or accessory buildings), subject to limitations established to maintain compatibility with a residential neighborhood. Examples of permissible uses include professional offices, home offices, daycares, handicrafts, graphic arts, seamstress, beauty/hair salon or similar businesses. Home occupations shall maintain, to the greatest extent possible, the residential character of a neighborhood.

**Uses with the following characteristics are expressly prohibited as home occupations:**

- Repair and/or servicing or painting of automobiles, trucks, boats, RV's, motorcycles, and ATV's.
- Any use requiring sewage pre-treatment in accordance with Post Falls Municipal Code.
- Businesses creating external noise, odors, vibrations, or other nuisances including substantial customer traffic.

Before establishing a home occupation, a Business License Application must be reviewed and approved by the Zoning Administrator. An application must include accurate and a concise description of the business operation.

The Zoning Administrator will review the application and will grant, grant with conditions, or deny the home occupation permit upon finding that the home occupation will not adversely affect the character of the neighborhood or create a nuisance (noise, dust, odor, excessive traffic etc.) and that it complies with City standards. A permit may be revoked or a violation may be prosecuted for non-compliance with standards or conditions of approval.

A decision by the Zoning Administrator may be appealed to the Planning and Zoning Commission and thereafter to the City Council respectively, in accordance with the appeals section found within the Post Falls Zoning Ordinance.

A Home Occupation Permit is effective the date that the permit is approved, is nontransferable and is valid so long as the conditions of approval issued with the permit are complied with and home occupation standards set forth herein are met.

I hereby acknowledge that I have read and agree to the Post Falls Home Occupation Performance and Standards.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

**CONTACT INFORMATION**

**City of Post Falls City Hall:** (208) 773-3511, Fax (208) 773-8362, [www.postfallsidaho.org](http://www.postfallsidaho.org)

**Community Development Department:** (208) 773-8708, Fax (208) 773-2505, [www.postfallsidaho.org](http://www.postfallsidaho.org)

**Kootenai County Fire & Rescue:** (208) 676-8739, Fax (208)676-0558, [www.kootenaifire.com](http://www.kootenaifire.com)

**Post Falls Police Department:** (208) 773-3517, Fax (208) 773-3200, [www.postfallspolice.com](http://www.postfallspolice.com)

**Post Falls Public Works/Wastewater:** (208) 777-9857, Fax (208) 773-0549, [www.postfallsidaho.org](http://www.postfallsidaho.org)

**Panhandle Health District:** (208) 415-5100, [www.phd1.idaho.gov](http://www.phd1.idaho.gov)

**Post Falls Chamber of Commerce:** (208) 773-5016, Fax (208) 773-3843, [www.postfallschamber.com](http://www.postfallschamber.com)

**State of Idaho Dept. of Licensing:** (208) 332-0102, Fax (208)-332-0106, [www.idaho.gov/business/licensing.html](http://www.idaho.gov/business/licensing.html)