



COLLIER COUNTY GOVERNMENT  
GROWTH MANAGEMENT DEPARTMENT  
[www.colliergov.net](http://www.colliergov.net)

2800 NORTH HORSESHOE DRIVE  
NAPLES, FLORIDA 34104  
(239) 252-2400 FAX (239) 252-6358

**LAND USE AND ZONING CERTIFICATE: HOME OCCUPATION**  
LDC section 5.02.00 & subsection 10.02.06 B.1.f  
Chapter 4 K. of the Administrative Code

Please take the time to fill out this form as completely as possible. Only someone actually living at the address given below may engage in the home occupation described. Customers or employees not living at this address are prohibited from traveling to and from the residence if visits are related to this home occupation. The applicant is the person in whose name the Business Tax Receipt will be issued, and the applicant's signature must appear on this form. *Verification as property owner or lessee in the form of a **Valid Florida's Driver License** or Florida Identification Card and/or copy of valid lease agreement is required.*

**APPLICANT CONTACT INFORMATION**

Zoning Certificate # \_\_\_\_\_ Business Tax License # \_\_\_\_\_  
Name of Applicant(s): \_\_\_\_\_  
Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

**BUSINESS & USE INFORMATION**

Business Name (If any): \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Description of the type of business or use: \_\_\_\_\_

**Collier County Land Development Code Section 5.02.00- Home Occupations**

**5.02.01- Applicability**

Home occupations shall be allowed in any zoning district which permits residential dwellings as a permitted use.

**5.02.02- Allowable Home Occupation Uses**

There shall be no retail sale of materials, goods, or products from the premises.

**5.02.03- Standards**

The home occupation shall be clearly incidental to the use of the dwelling for dwelling purposes. The existence of the home occupation shall not change the character of the dwelling.

- A. An allowable home occupation shall be conducted by an occupant of the dwelling.
- B. There shall be no on-site or off-site advertising signs.
- C. The use shall not generate more traffic than would be associated with the allowable residential use. To that end, traveling to and from as well as meeting or parking at the residence by either employees of the business operated there from who are not residing at the subject address or



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by customers or clients of the home occupations is prohibited.

- D. There shall be no receiving of goods or materials other than normal delivery by the U.S. Postal Service or similar carrier.
- E. Parking or storage of commercial vehicles or equipment shall be allowable only in compliance with the requirements for commercial vehicles in the County Code.
- F. The on-site use of any equipment or materials shall not create or produce excessive noise, obnoxious fumes, dust, or smoke.
- G. The on-site use of any equipment or tools shall not create any amount of vibration or electrical disturbance.
- H. No on-site use or storage of any hazardous material shall be kept in such an amount as to be potentially dangerous to persons or property outside the confines of the home occupation.
- I. There shall be no outside storage of goods or products, except plants. Where plants are stored, no more than fifty (50) percent of the total square footage of the lot may be used for plant storage.
- J. A home occupation shall be subject to all applicable County occupational licenses and other business taxes.

*I, the undersigned, hereby affirm that I am the legal owner of the property at the above address or that I have the legal right to conduct the business described above at this address by virtue of my leasehold interest in this property, and that I have read, understood, and agree to abide by the provisions of LDC Section 5.02.00 "Home Occupations".*

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**FEE: \$50.00 CHECKS PAYABLE TO: "COLLIER COUNTY TAX COLLECTOR"**

**The following to be completed by County Staff:**

Zoning: \_\_\_\_\_ Property ID #: \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Hold  Denied

Comments/Restrictions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Staff Reviewer

\_\_\_\_\_  
Date

Tax Collector Staff: Clerks Initials: \_\_\_\_\_

Horseshoe