

**Town of Seabrook  
99 Lafayette Road  
PO Box 456  
Seabrook, NH 03874-0456  
(603) 474-3311**

**HOME BUSINESS EXEMPTION FORM**

In order for the town to update and correct its data list this form must be completed. Sufficient information should be given so that the town is able to make the determination that your business is exempt from the ordinance.

**As Defined by Town of Seabrook Land Use Regulations:**

***Home Occupation is a home-based business that has no noticeable impact on the quality and character of Seabrook's residential districts. In order to qualify as a Home Occupation, the business must meet all of the following standards: 1) no more than two non-resident employees; 2) it is not a nuisance; 3) it is conducted within a pre-existing building; 4) parking is located off the street, and the vehicles are subject to zoning setbacks for structures; 5) no emission of odor, smoke, dust, vibration, or noise that is discernible from the property line; 6) no on-site storage of hazardous, flammable, or explosive materials other than small quantities of products that are intended for normal household use; and 7) deliveries are permitted only between 7AM and 7PM***

***Any impact on surrounding properties such as noise or traffic will result in revocation of the Home Business License***

**Please complete the following:**

**Business Name (Please Print):** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

**Business Telephone:** \_\_\_\_\_

**Description of Home Business:** \_\_\_\_\_

**Business Owner Name (Please Print):** \_\_\_\_\_

**Business Owner Mailing Address (Please Print):** \_\_\_\_\_

**Property Owner's Name (Please Print):** \_\_\_\_\_

**Property Owner's Telephone Number:** \_\_\_\_\_

Does the proposed business Emit odors, noise, dust, vibration, smoke or fumes which travel beyond the boundary lines of the subject property; or cause erosion or the discharge of chemicals and other pollutants from storm water?

**YES/NO (Circle One)**

**Chemicals Stored on Property:** \_\_\_\_\_

**Emergency Contact:**

**Name(s):** \_\_\_\_\_

**Telephone Number(s):** \_\_\_\_\_

I BELIEVE I MEET THE DEFINITION OF A HOME BUSINESS AND THEREFORE AM EXEMPT FROM THE TOWN'S BUSINESS LICENSE ORDINANCE.

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PROPERTY OWNER'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

\*\*\*\*\***FOR OFFICE USE ONLY**\*\*\*\*\*

**APPROVED/DENIED**

**CODE ENFORCEMENT OFFICER:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**APPROVED AS PER ZONING REGULATIONS IN PLACE FOR THE TOWN OF SEABROOK  
AS OF THE DATE SIGNED BY THE CODE ENFORCEMENT OFFICER**