



# SELF-SERVE PERMITTING INSTRUCTIONS

## Home Occupation

### HELPFUL INFORMATION:

- Both the local Zoning Code and the New York State Building Code regulate Home Occupations, however each regulates this use slightly different. You must adhere to both Codes and the more restrictive code applies if there is a conflict.
- The attached sheet explains the regulations relating to a Home Occupation.
- A Business Permit is not required for a Home Occupation.

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### MINIMUM SUBMISSION REQUIREMENTS:

- ✓ Completed permit application (attached)
- ✓ Floor Plan drawn to scale (sample attached)
- ✓ Written description of proposed new use
- ✓ Completed Certificate of Occupancy (C of O) application
- ✓ Fee (will be determined once application is submitted)

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**HOW TO SUBMIT:** Your completed permit application package including fee (checks or money order made payable to “City Treasurer”) can be submitted by:

- Email: [zoning@cityofrochester.gov](mailto:zoning@cityofrochester.gov) (online payment instructions will be sent)
- Drop box provided in our self-serve area, room 121B.
- Mail to us at: The Bureau of Zoning & Permitting
- 30 Church Street, Room 121B  
Rochester, NY 14614

If you have any questions, please call 428-7043 for additional instructions. **Incomplete applications will be returned.** Thank you.





# BUILDING PERMIT APPLICATION and ZONING COMPLIANCE REQUEST

PROPERTY ADDRESS: \_\_\_\_\_

USE:  RESIDENTIAL (1 or 2 Family)  COMMERCIAL  MIXED USE

## APPLICANT INFORMATION:

YOUR NAME: \_\_\_\_\_ YOUR PHONE NUMBER: \_\_\_\_\_  
(not a company name)

YOUR EMAIL ADDRESS: \_\_\_\_\_

YOUR MAILING ADDRESS: \_\_\_\_\_

### PROPERTY OWNER:

Check if same as applicant above

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Cannot be a PO Box) (include City or Town)

Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### CONTRACTOR: (check if same as:)

Owner  Applicant (check both if applicable)

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Cannot be a PO Box) (include City or Town)

Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

ARCHITECT: \_\_\_\_\_  
OR ENGINEER

## PERMIT REQUEST:

DESCRIPTION: \_\_\_\_\_

ADDITION/NEW CONSTRUCTION  INTERIOR RENOVATIONS  EXTERIOR RENOVATIONS

CHANGE/ESTABLISH USE  DECK  POOL/HOT TUB  SHED/GARAGE/CARPORT

HVAC/MECHANICAL/ELECTRICAL SYSTEMS  OTHER: \_\_\_\_\_

PROJECT COST ESTIMATE: (excluding plumbing & electrical) \$ \_\_\_\_\_

YOUR SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

## **Zoning Code Regulations:**

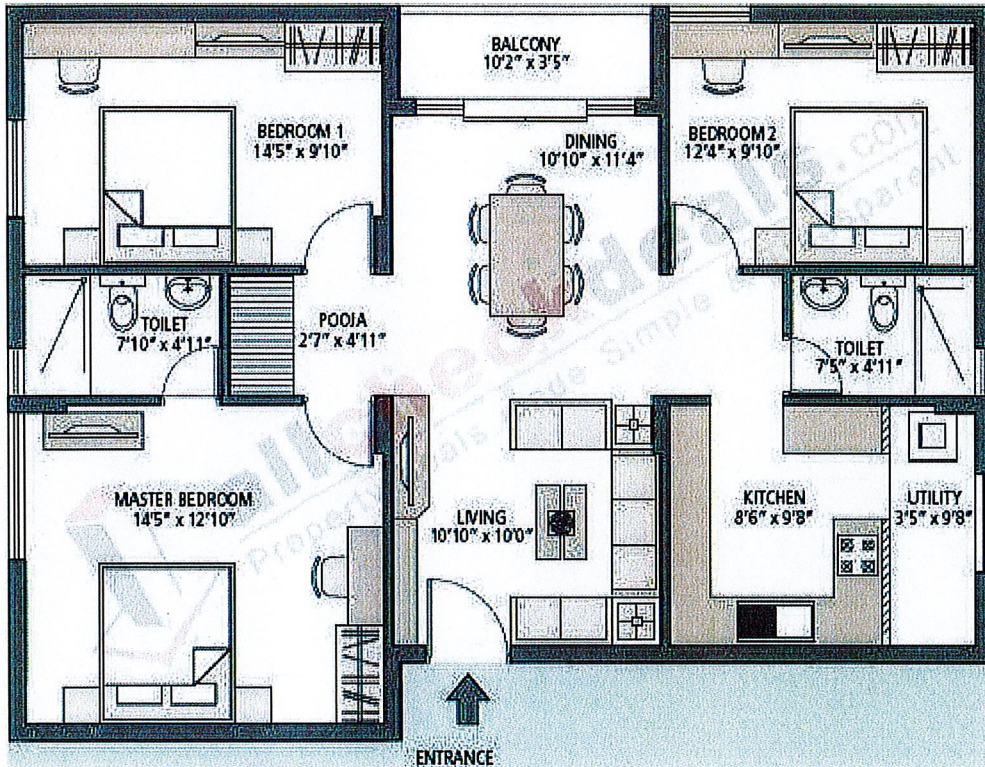
- A Home Occupation must be within a legal dwelling unit or an accessory building on the same parcel (see NYS Building Code below for stricter regulations)
- No more than 25% of the floor area of the dwelling unit shall be devoted to the home occupation (see NYS Building Code below for stricter regulations).
- No stock-in-trade shall be displayed or sold on the premises.
- Not more than one person who is not a member of the family residing on the premises can be employed and then only as a clerical assistant.
- No alterations to the principal building which change the residential character can be made
- No signage shall be allowed in the R-1 District. In all other districts one unlighted sign not over one square foot in area attached flat against the dwelling and displaying only the occupant's name and occupation shall be permitted to advertise the presence or conduct of the home occupation.
- A Home Occupation should not apparat from any public way
- There shall be no outdoor storage of commercial vehicles, equipment or materials used in the home occupation.
- Commercial vehicles shall not be permitted in connection with any home occupation.
- No mechanical, electrical or other equipment which produces noise, electrical or magnetic interference, vibration, heat, glare or other nuisance outside the residential or accessory structure shall be used.
- No home occupation shall be permitted which is noxious, offensive or hazardous by reason of hours of operation, vehicular traffic, generation or emission of noise, vibration, smoke, dust or other particulate matter, odorous matter, heat, humidity, glare, refuse, radiation or other objectionable emissions.

## **New York State Building Code Regulations:**

- Home Occupation is only permitted within a dwelling unit
- Home Occupation cannot exceed 15% of the habitable space of the dwelling unit.

# SAMPLE RESIDENTIAL FLOOR PLAN

- MUST BE DRAWN TO SCALE
- MUST INCLUDE ALL DIMENSIONS OF: ROOMS, DOORS AND WINDOWS
- MUST LABEL USE OF EACH ROOM





**City of Rochester, New York**  
 The Bureau of Buildings & Compliance  
 Room 028B, 30 Church Street  
 Rochester, New York 14614  
 www.cityofrochester.gov

**Certificate of Occupancy Application (Office Use Only)**

Case No. \_\_\_\_\_ Legal Use \_\_\_\_\_  
 C of O No. \_\_\_\_\_ Permit No. \_\_\_\_\_  
 Inspect Date: \_\_\_\_\_ CZC No. \_\_\_\_\_

**1. BUILDING INFORMATION:**

Address: \_\_\_\_\_ Garage (# of cars) \_\_\_\_\_ Attached or Detached (circle)  
 Is the property vacant:  Yes  No If yes, date vacancy began: \_\_\_\_\_

**2. APPLICANT INFORMATION:**  Owner  Tenant  Agent

The applicant acknowledges that the information contained in this application is true to the best of their knowledge:

Applicant name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**3. BUILDING OWNER'S REGISTRY REQUIRED \* :** (required per §90-20 of the City Code)

**a. PROPERTY OWNER:**

Check if same as applicant above

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
(Cannot be a PO Box) (include City or Town)  
 Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**b. PROPERTY MAINTENANCE CONTACT:** (check if same as:)

Owner  Applicant (check both if applicable)

Name: \_\_\_\_\_  
(Must be an actual person)  
 Address: \_\_\_\_\_  
(Cannot be a PO Box) (include City or Town)  
 Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

\* Failure to provide the above information will result in a violation per §90-20 of the City Code.

**4. INSPECTION CONSENT: (must check one)**

I, \_\_\_\_\_, am the owner/agent of the above referenced property. I have retained legal custody and control over the property to have it inspected. I do agree and consent to allow the City to inspect the property in its entirety as part of the City requirement for a Certificate of Occupancy. Inspection permission includes the initial inspection, any and all necessary reinspection and audit inspections until such time as a Certificate of Occupancy is issued.

I do not consent to have my property inspected by the City of Rochester and I understand that the City of Rochester may make an application for an administrative inspection warrant which may cause a delay in processing the application for a Certificate of Occupancy.

**5. APPLICANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**OFFICE USE ONLY**

CAUSE:  New  Alteration  Change Use  Transfer  Reoccupation  Renewal  Partial \_\_\_\_\_

Posting Occupancy: \_\_\_\_\_ Construction Type: \_\_\_\_\_ # of Stories: \_\_\_\_\_ Sprinkler System: Yes  No

Final C of O shall read: \_\_\_\_\_

BLDG. CODE APPROVAL: \_\_\_\_\_

**ZONING APPROVAL:** \_\_\_\_\_ Date: \_\_\_\_\_

List any conditions of zoning approval which shall be stated on the final C of O:

FEE: \_\_\_\_\_ If Paid By: \_\_\_\_\_

**PENALTY FEE APPLIES AFTER DATE ABOVE**