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# VILLAGE OF CORRALES

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## Application for Home Occupation Permit

Everyone who operates or plans to operate a business at any location within the A-1, A-2, or H zones of the Village of Corrales must obtain a Home Occupation Permit (ZOC) issued by the Village. (Ch.18 Sec. 18-45(c)(1), Codified Ordinances of the Village of Corrales.). In order to obtain a Home Occupation Permit, you must follow these procedures:

### Instructions:

\* If you have any questions about filling out the form or about the process, please phone, email or make an appointment with a Planning and Zoning staff member. We are here to help.

1. Fully and accurately complete the Home Occupation Permit application and attach ALL of the following:
  - a) **One or more photographs** of the home from the road, showing access;
  - b) **A map or sketch** clearly showing the location of the proposed business activity on the property;
  - c) **A site plan** (google map or other aerial view) **showing all structures, the road that serves the property with view of 25 feet of adjacent properties, and on-site parking** provisions to meet any parking needs of the business (a regular parking space is 9'x20');
  - d) A copy of your valid **New Mexico CRS ID** certificate.
2. Submit the application, **\$35.00 fee and nine (9) copies of all required materials**, to Planning & Zoning. If the application is complete, the administrator will in some cases be able to provide review and permit approval, or otherwise will schedule a hearing by the Planning and Zoning Commission within 60 days of a 100% complete application.
3. If Planning & Zoning Commission approval is necessary, you will **post an easy-to-see notice (yellow sign)**, which you must obtain from the Village, for fifteen (15) days prior to the meeting when your application will be heard.
4. **Attend the hearing** and be prepared to answer questions.
5. Obtain a Village **business registration** (\$35 fee annually) within 90 days, if your Home Occupation is approved by the Commission or Administrator.

**\*An application without all the required attachments is incomplete. If the application is not complete, it will be returned and will NOT be set for hearing until resubmitted in a complete form.**

### General Information

Name of Applicant: \_\_\_\_\_ Date \_\_\_\_\_

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

Physical Address: \_\_\_\_\_  
Number Street

Mailing Address: \_\_\_\_\_  
(if different from physical) Number Street

Legal Description: \_\_\_\_\_ Map No. \_\_\_\_\_  
Subdivision Lot/Tract

Acreage: \_\_\_\_\_ Zoning: \_\_\_\_\_

Are you the property owner? Yes \_\_\_ No \_\_\_. Do you reside here? Yes \_\_\_ No \_\_\_. If you are not the property owner, you MUST attach a letter signed by the owner granting approval for the proposed business use.

Are there other home occupations on the property? Yes \_\_\_\_\_ No \_ (Cannot exceed 4 at any one time) If YES, you must attach copies of the approvals for existing home occupations to the application.

Total square footage of home: \_\_\_\_\_  
(Exclude garage unless part of home occupation) Square Feet

How many square feet of the home will you use for your home business? \_\_\_\_\_  
(Cannot exceed 25% of total, or 45% in Neighborhood Community & Office District NCOD) Square feet

Will you use accessory structures in your home occupation? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, how many square feet of accessory structures will you use for your home business?  
\_\_\_\_\_ (Cannot exceed 2,000 square ft., or 4,000 in NCOD)

What is the name of your business? \_\_\_\_\_

Briefly describe your business and its functions \_\_\_\_\_

What days/hours will your business operate? \_\_\_\_\_

Will clients/customers be coming to your home? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please circle how many persons/vehicles will come to your home for business purposes:

Per Day: 1-5; 6-10; >10 ;

Per Week: 1-5; 6-10; 11-20; >20.

How many *additional* motor vehicle trips in and out of the property will be generated by your business (deliveries, your own business-related trips, and any other business-related trips)  
Per Week? \_\_\_\_\_

Will the business be conducted strictly by mail and/or electronic communications? Yes \_\_\_ No \_\_\_

Will there be any materials storage? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain what the materials are and how and where they will be stored.

\_\_\_\_\_

Will there be any employees who are not residents of the property? Yes \_\_\_\_\_ No \_\_\_\_\_

The statements below track the **requirements** of the Village Code section governing Home Occupation Permits (ZOC). (Chapter 18-45(c)(1)(5)). By initialing these items, you certify that you meet these criteria and will abide by them if your home occupation is approved. Violating these requirements may result in the loss of your Home Occupation Permit or Business License.

**INITIAL EACH APPLICABLE ITEM.** (Initial items. Do not use X or check mark.)

Item a, and items d through j MUST be initialed. Initial either b1 OR b2, and either c1 OR c2, whichever is applicable in each case.

\_\_\_\_\_ a. The use of the dwelling unit for the home occupation shall be clearly subordinate and incidental to its use for residential purposes by the occupants.

\_\_\_\_\_ b1. No more than 25% of the floor area of the dwelling unit and not more than 2,000 square feet in one accessory building shall be used for all home occupations upon the lot.

**Or, if applicable:**

\_\_\_\_\_ b2. My lot is zoned A-1 and is located in the Neighborhood Community and Office District (NCOD); no more than 45% of the floor area of the dwelling unit or more than 4000 square feet of any accessory building will be used for all home occupations upon the lot.

\_\_\_\_\_ c1. Other than family members, no more than 1 (ONE) person will engage in the home occupation(s) on the premises at any one time.

**Or, if applicable:**

\_\_\_\_\_ c2. My lot is zoned A-1 and is located in the NCOD; other than family members, no more than three (3) persons will be engaged in the home occupation on the premises at any one time.

\_\_\_\_\_ d. There will be no change in the exterior appearance of the buildings or premises (except for a single sign authorized and permitted under Chapter 8, Art. IV.).

\_\_\_\_\_ e. All business-related tools and materials shall be maintained to have an orderly appearance.

\_\_\_\_\_ f. No equipment or process shall be used in the home occupation which creates noise, vibration, glare, fumes, noxious odors, or other nuisances detectable from adjacent properties.

\_\_\_\_\_ g. There shall be no sales of goods or services from the home, which would generate greater traffic volume than would be created in a residential neighborhood.

\_\_\_\_\_ h. No more than two (2) service vehicles used in the conduct of the home occupation shall be upon the premises at any one time for all home occupations and business registrations.

\_\_\_\_\_ i. Any parking needs generated by the conduct of the home occupation shall be met by using off-street parking.

\_\_\_\_\_ j. Maximum of four (4) home occupations shall be permitted on any one lot at one time.

**I certify that I meet the above requirements and will abide by them. I understand that I may lose my Home Occupation Permit and Business License if I violate any of these requirements. I also understand and agree that any representation made by me in connection with this application, whether orally or in writing, is deemed to be a condition of the Home Occupation Permit, and violation of such condition may result in loss of my Home Occupation Permit and Business License.**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**PLANNING & ZONING OFFICE USE ONLY**

Received By: \_\_\_\_\_ Date Received: \_\_\_\_\_ File No.: ZOC- \_\_\_\_\_

Amount Paid: \_\_\_\_\_  Cash  Check No.: \_\_\_\_\_ Receipt No.: \_\_\_\_\_

Credit Card No. \_\_\_\_\_

Application Reviewed and certified complete by: \_\_\_\_\_ Date: \_\_\_\_\_

**Planning and Zoning Commission Approval/Denial:**

**APPROVED** with the following conditions, if any:

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

Village Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
Village Administrator (hearing date, if applicable)

Ninety Day Business License Application Deadline: \_\_\_\_\_

**DENIED** with the following findings:

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

Denial: \_\_\_\_\_ Date: \_\_\_\_\_  
Village Administrator (hearing date, if applicable)