



CITY OF BAYSWATER

Civic Centre, 61 Broun Avenue, Morley, Western Australia 6062

Business Hours: 8.30 a.m. to 4.30 p.m.

Telephone: (08) 9272 0622 Facsimile: (08) 9272 0665

Postal Address: PO Box 467, Morley, W.A. 6943

Home Office Registration Checklist

This form is required to be completed by persons applying for a Home Office.

NAME	
BUSINESS NAME (if applicable)	
PROPERTY ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	
DESCRIBE THE NATURE OF THE HOME OFFICE	

PLEASE ANSWER THE FOLLOWING QUESTIONS ON THE PROPOSED HOME OFFICE

YES	NO	QUESTION
		1. Do you live at the subject property?
		2. Do you own the subject property? If you do not own the subject property, please attach the written approval of the landowner.
		3. Will the Home Office employ person(s) not permanently living at the property? If the answer is yes, you may not qualify to be a Home Office. Please refer to the 'Home Based Business Information Sheet' for further information.
		4. Will the Home Office involve retail sales or the display of goods? If the answer is yes, you may not qualify to be a Home Office. Please refer to the 'Home Based Business Information Sheet' for further information.
		5. Will the Home Office have customers and/or deliveries to the site? If the answer is yes, you may not qualify to be a Home Office. Please refer to the 'Home Based Business Information Sheet' for further information.
		6. Will the Home Office require signage? If the answer is yes, you may not qualify to be a Home Office. Please refer to the 'Home Based Business Information Sheet' for further information.

YES	NO	QUESTION
		7. Will the Home Office require changes to the outside of the dwelling? If the answer is yes, you may not qualify to be a Home Office. Please refer to the 'Home Based Business Information Sheet' for further information.
		8. Will the Home Office involve mechanical repairs, panel beating or other automotive repairs? If the answer is yes, you may not qualify to be a Home Office. Please refer to the 'Home Based Business Information Sheet' for further information.

Please note: It is the responsibility of the applicant to advise the City of Bayswater of any changes to the information above.

DECLARATION

The applicant hereby applies to conduct a Home Office at the above address and confirms that the business description and particulars described above are true.

Signature(s) of applicant(s):	
Date:	

FURTHER INFORMATION

Should you require any further information, please contact the City's Planning and Development Services Division.

Phone: (08) 9272 0622

Fax: (08) 9272 0665

E-mail: mail@bayswater.wa.gov.au

Web: www.bayswater.wa.gov.au

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Updated February 2011.