

Benton County Development Department
Planning Division
2113 W. Walnut Street
Rogers, AR 72756
(479) 464-6166
<http://www.bentoncountyar.gov>



Date Stamp

OWNER AFFIDAVIT - HOME AND RURAL FAMILY OCCUPATION

Any use conducted entirely within a dwelling or an accessory building which is clearly incidental and secondary to the use of the dwelling and which does not change the residential character of the building and the surrounding area is classified as a Home Occupation.

Home and Rural Family Occupations that meet all of the following criteria are allowed by right and exempt from review. Check all the applicable criteria:

- Operate entirely within the dwelling or an accessory building with no more than twenty-five (25%) percent of the gross floor area of the home and or any accessory building utilized in the day to day operations of the home based business.
- Home and Rural Family Occupations shall be operated and conducted primarily by the resident owner of the property.
- Phone order, fax and or internet sales or sale of items that is clearly incidental to the farm activities or residential use of the site by the property owner.
- Any commercial activity that shall be incidental to residential or farm activities and shall not meet the threshold for site plan review.
- Any use that does not require a building code or septic upgrades (i.e. from residential standards to commercial standards) to accommodate the home and rural family occupation.
- The home and rural family occupation does not display merchandise or have outside storage of equipment or materials visible from a public road or adjacent residence. If located outside the building such use shall be adequately setback and appropriately screened from adjacent properties.
- The home and rural family occupation does not alter the external appearance of the dwelling unit or accessory structure and maintains the rural residential character.
- The home and rural family occupation does not create noise, vibration, glare, fumes, electromagnetic interference, odors, or air and water pollution or any environmental concerns outside the dwelling unit or accessory building on site.
- The home and rural family occupation does not involve the storage of hazardous materials, other than substances of a type and quantity customarily associated with a home or hobby. Further, the use of buildings or structures for the home occupation shall not involve the manufacturing, processing, generation or storage of materials that constitute a high fire, explosion or health hazard as defined by the International Building Code.
- When located in a subdivision, the home occupation has no more than one non-illuminated business sign on the premises, not more than two square feet in area. In rural areas with lot sizes of 1 acre or more, one non-illuminated sign of nine square feet in area and six feet tall may be allowed.
- The home and rural family occupation shall not warrant delivery or parking needs that have the potential to adversely affect traffic for adjacent and surrounding properties. Further, parking areas for residents, employees or customers and or loading areas shall be located on site, adequately setback and appropriately screened from adjacent properties. In subdivisions, parking of non-motorized vehicles, such as, boats, trailers, or flatbeds shall not be allowed unless adequately screened.

See list of non-exempt home occupations including bed and breakfasts; kennels; towing services; auto wreckers; junkyards etc.

PLEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

BENTON COUNTY EXEMPT HOME AND RURAL FAMILY OCCUPATION APPLICATION FORM

INSTRUCTIONS FOR APPLICANT:

Applications must be submitted in person. Please make an appointment with a planner to discuss the proposed development and to determine if a complete application is submitted.

Please review Site Plan Review Regulations prior to application submission (Chapter 7). Planning Board Calendar including meeting schedules (included with Application).

| Item | | Provided (Yes/No) | |
|------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|------------------|
| | | Date Provided | Staff Initial |
| | Completed application with notarized original signatures | | |
| 1. | Fee- \$100.00 | | |
| 2. | Written Description of the proposal | | |
| 3. | Initial submission: Site Plans to scale - 1 copy 11"x17" *Confirm size with Planning Staff Final Approved Plan: 4 originals, no greater than 18"x24", 1 copy 11"x17" | | |
| 4. | All applicable forms as required. Service Agreement Forms Water, Electricity, Septic maintenance, Landscaping, Fire Protection, Solid Waste. Others as applicable to specific projects. Notification Letter (Review with staff prior to Mailing) | | |
| 5. | Submit all applicable State and Federal Permits | | |
| 6. | Electronic versions of all materials, drawings and completed application form | | |
| 7. | Landscaping installation & Maintenance Plan | | |
| 8. | Any additional materials as needed by Staff or Planning Board or supplemental information | | |
| 9. | Request for Variance or waivers | | |
| 10. | | | |

BENTON COUNTY EXEMPT HOME AND RURAL FAMILY OCCUPATION APPLICATION FORM

REGISTERED OWNER AND APPLICANT INFORMATION

Provide in full the name of the registered owner, agent/ applicant (if different than the owner) contact details. If the registered owner is a numbered company, provide the name of the principals of the company. If there is more than one owner, copy this page, complete in full and submit with this application.

An authorized applicant and agent for the owner must attach a notarized letter of authorization from the legal property owner. Written authorization from the legal property owner is required at the time of application or the documents will not be accepted.

Property Owner

Name: _____

Address: _____

Phone: _____

Email: _____

Contact Person: _____

Postal Code: _____

Fax: _____

Applicant / Agent(If other than the Property Owner) Please complete Form A and or B, attached

Name: _____

Address: _____

Phone: _____

Email: _____

Contact Person: _____

Postal Code: _____

Fax: _____

NOTARIZED OWNER CERTIFICATION

I certify under penalty of the laws of the State of Arkansas that I am the property owner of the property that is the subject matter of this application and I am authorizing to and hereby do consent to the filing of this application, acknowledge that the final approval by Benton County, if any, may result in restrictions, limitations and construction obligations being imposed on this real property and hereby authorize Benton County Staff to enter my property for the duration of the review.

I confirm that the information contained in this application and accompanying documents is accurate to the best of my knowledge. I hereby acknowledge that it is my responsibility to ensure that I am in compliance with all applicable laws, regulations, and permits at the State or Federal levels.

Owner/Authorized Agent Print Name: _____

Owner/Authorized Agent Signature: _____ Date: _____

State of Arkansas, County of _____

Subscribed and sworn to before me this _____ day of _____ 201__.

NOTARY PUBLIC

My Commission expires

BENTON COUNTY EXEMPT HOME AND RURAL FAMILY OCCUPATION APPLICATION FORM

3. DESCRIPTION OF SUBJECT PROPERTY

a. **Address:** _____
 (If none currently, contact 911 Administration)

b. **Assessor's Parcel Number (s):** _____

c. **Site Area (acres/ square feet):** _____

d. **Area of Development (acres/ square feet):** _____

e. **Existing Land Use:** _____

f. **Proposed Development & Use:** _____

g. Parking/Loading Spaces

| | Existing | Proposed (New) | Total |
|----------------------|----------|----------------|-------|
| # of Parking Spaces | | | |
| Total Loading Spaces | | | |

h. Description of Screening/Buffer

| Proposed Screening | Existing | Proposed |
|--------------------------------------------------------|----------|----------|
| Fence (length and location, material) | | |
| Landscape Buffer (length, size, spacing, and location) | | |
| Other - Describe | | |

i. Building setbacks

| | Existing Buildings | Proposed buildings |
|---------------|--------------------|--------------------|
| Front setback | | |
| Side setback | | |
| Rear setback | | |

j. Access to Subject Lands: Check all that apply

- County Road, Name _____ Highway, Name _____
 Private easement, Describe _____

k. Water, Sanitary Sewage and Storm Drainage: Check all that apply

Water- Indicate the source of water on-site

- Public/Semi Public Private/Semi Private well

BENTON COUNTY EXEMPT HOME AND RURAL FAMILY OCCUPATION APPLICATION FORM

Sanitary- Indicate the type of sewage disposal facility: Check all that apply

- Publicly owned and operated sanitary sewage system
- Privately owned and operated individual septic system
- Other

Have you received approval from Heath Department?

- Yes
- No
- Approval awaited (Date)

Storm Drainage- Indicate how storm drainage will be provided on-site: (Chapter X, Appendix D)

- Ditches
- Swales
- Retention pond
- Detention pond
- Bio retention pond
- Low Impact Development options (Appendix B)
- Other

4. **I confirm that the information contained in this application and accompanying documents is accurate to the best of my knowledge.**

I hereby acknowledge that it is my responsibility to ensure that I am in compliance with all applicable laws, regulations, and permits at the State or Federal levels.

Name and Signature of applicant

Date

State of Arkansas
County of _____
Subscribed and sworn to before me this _____ day of _____ 201__.

NOTARY PUBLIC

My Commission expires

**BENTON COUNTY EXEMPT HOME AND RURAL FAMILY OCCUPATION APPLICATION FORM
OFFICE USE ONLY**

AUTHORIZATION TO PROCESS: This application has been received and accepted for processing

Name of Planning staff

Date of Authorization to process

| | Item | Comment | | | | |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------------------|-----------|--------------------------|
| 1. | Name of Planning Jurisdiction | | | | | |
| 2. | Is the subject property located in a Floodplain? | <table border="0"> <tr> <td>Yes</td> <td><input type="checkbox"/></td> </tr> <tr> <td>No</td> <td><input type="checkbox"/></td> </tr> </table> | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Yes | <input type="checkbox"/> | | | | | |
| No | <input type="checkbox"/> | | | | | |
| 3. | Is the subject property located in County's MS4 area? | <table border="0"> <tr> <td>Yes</td> <td><input type="checkbox"/></td> </tr> <tr> <td>No</td> <td><input type="checkbox"/></td> </tr> </table> | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Yes | <input type="checkbox"/> | | | | | |
| No | <input type="checkbox"/> | | | | | |
| 4. | Date the applicant attended DRC | | | | | |
| 5. | Service Agreement Forms (Form F)- Water, Electricity, Septic maintenance, Landscaping, Fire Protection, Solid Waste. Others as applicable to specific projects. | | | | | |
| 6. | Site Visits | | | | | |

Application Fee: \$ _____ **Receipt No.:** _____ **Date:** _____

Assigned File No.: _____ **Related Planning File No.:** _____

Additional Notes _____

FORM A - NOTARIZED AUTHORIZATION OF REGISTERED OWNER FOR THE APPLICANT (OTHER THAN THE OWNER) TO SUBMIT THE APPLICATION

If the applicant is not the registered owner of the land that is subject of this application, the written authorization of the registered owner that the applicant is authorized to make the application must be included with this application form and the authorization below must be completed.

I (We), _____,
(owner of the subject land, address or parcel No.)

hereby authorize and instruct _____
(applicant)

to submit an application to the Benton County Development Department. This shall be my (our) good and sufficient authority to act on my (our) behalf and to negotiate or bond on my behalf.

(Sign) Date

Note: if the owner is a corporation, affix seal (if any)

FORM B - NOTARIZED AUTHORIZATION OF REGISTERED OWNER FOR THE AGENT (OTHER THAN THE OWNER) TO SUBMIT THE APPLICATION AND BE THE ONLY POINT OF CONTACT WITH BENTON COUNTY PLANNING DEPARTMENT

I (We), _____,
(owner of the subject land, address or parcel No.)

hereby authorize and instruct _____
(agent)

to submit an application to the Benton County Development Department. This shall be my (our) good and sufficient authority to act on my (our) behalf and to negotiate or bond on my behalf.

(Sign) Date

Note: if the owner is a corporation, affix seal (if any)

FORM C - PERMISSION TO ENTER THE SUBJECT PROPERTY

I hereby authorize the Planning Board and/or staff of Benton County, Arkansas to enter upon the subject lands and premises for the purpose of evaluating the merits of this application and subsequently to conduct any inspections and work on the subject lands that may be required as a condition of approval. This is their authority for doing so.

Subject lands: _____

Signature of owner Date

State of Arkansas

County of _____

Subscribed and sworn to before me this _____ day of _____ 201__.

NOTARY PUBLIC

My Commission expires

FORM D – HAZARDOUS CHEMICAL COMPLIANCE FORM

BENTON COUNTY DEPARTMENT OF EMERGENCY MANAGEMENT AND HOMELAND SECURITY

215 E. CENTRAL AVE #7, BENTONVILLE, AR 72712

Phone: 479-271-1004

Fax: 479-271-1084

BUSINESS NAME: _____ TYPE OF BUSINESS: _____

OWNER'S NAME: _____

PHYSICAL LOCATION/ADDRESS: _____

MAILING ADDRESS: _____

CONTACT PHONE NUMBER: _____

CONSULTANT/ENGINEER: _____

A LETTER WILL BE SENT TO THE BUSINESS OWNER AND THE PLANNING OFFICE.

IF THERE ARE OTHER LOCATIONS PLEASE SPECIFY: _____

WILL THERE BE CHEMICALS STORED AT THIS FACILITY? YES _____ NO _____

IF YES – LIST NAME AND QUANTITIES BELOW:

BY SIGNING BELOW, I ACKNOWLEDGE THAT ALL INFORMATION ABOVE IS TRUE AND CORRECT. I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO NOTIFY THE BENTON COUNTY DEPARTMENT OF EMERGENCY MANAGEMENT IF THIS INFORMATION CHANGES.

OWNER SIGNATURE

DATE

BENTON COUNTY DEPARTMENT OF EMERGENCY MANAGEMENT ONLY

LETTER COMPLETED BY _____

DEM OFFICER

DATE

FORM F- Letter of Service Confirmation

Project Name:

Property Owner:

Map/Parcel No.:

Project Address:

The Benton County Development Department has received an application to review a:

Site Plan Review Subdivision Other _____

for the above mentioned property. In order to process this request, service coverage must be provided to the property. Please indicate if the above property is or will be receiving services from your utility or department. Should there be any conditions associated with the coverage to be extended to the above mentioned property please included those conditions in the appropriate area below.

Department/Utility: _____

Type of Coverage: _____

Please note your comments or concerns below. If additional conditions or stipulations of coverage extension are required please include those stipulations below. Attach additional pages if necessary. If you have no comments, please indicate by checking the "no comment" box below:

Conditions/Stipulations: _____

Other Comments: _____

Thank you for your assistance,

Submit to:
Benton County Development Department
Planning Division
1204 SW 14th Street, Suite 6
Bentonville, AR 72712

Office: 479-464-6166

Fax: 479-464-6170