

# BERNALILLO COUNTY

Planning & Development Services  
 111 Union Square SE, Suite 100  
 Albuquerque, NM 87102  
 (505) 314-0350 Fax: (505) 314-0480  
 www.bernco.gov



## PERMITTING CENTER

BUSINESS REGISTRATION  
 HOME OCCUPATION  
 APPLICATION

**I hereby verify that my current business operation and related activities are consistent with the Comprehensive Zoning Ordinance of Bernalillo County.**

The applicant shall comply with all applicable Bernalillo County ordinances and regulations within 90 days of acceptance of this application. It is the responsibility of the business owner to report any changes in activity, address, or status.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**I am not the owner of the property. I hereby verify that I have obtained authorization from the legally registered property owner or legal representative of the property owner or property to operate my business at this property.**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

<b>OWNER OF BUSINESS</b>			TODAY'S DATE
<i>If different from Property Owner, signature is required above.</i>			
MAILING ADDRESS	CITY	STATE	ZIP
E-MAIL	PHONE	MOBILE	

<b>NAME OF BUSINESS</b>		SPECIFIC ACTIVITY	TYPE OF BUSINESS	
BUSINESS ADDRESS		CITY	STATE	ZIP
E-MAIL		PHONE	MOBILE	
NM CONTRACTOR LICENSE # (IF APPLICABLE)	TYPE	6 DIGIT NAICS CODE: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
OFFICE OF HEALTH AND SOCIAL SERVICES (IF APPLICABLE):		The North American Industry Classification System (NAICS) code is the national standard used for classifying business establishments, for assistance in identifying and indicating yours log on to the NAICS website at <a href="http://www.census.gov/naics/">www.census.gov/naics/</a> .		
FEE: <b>\$50.00</b> (Checks Payable to Bernalillo County) <b>No Cash</b>		<b>NM TAX IDENTIFICATION NUMBER (CRS #)</b> ____ - ____ - ____ - ____ - ____ - ____		
<i>IT IS THE RESPONSIBILITY OF THE BUSINESS OWNER TO RENEW THE BUSINESS LICENSE ANNUALLY. LICENSES WHICH ARE UNRENEWED OR UNRESOLVED WITHIN 30 DAYS OF THE EXPIRATION DATE, WILL BE EXPIRED.</i>		If you do not have a State Tax ID number, you will need to obtain one before this application can be submitted. You may contact Taxation & Revenue at 841-6200, or visit their website at <a href="http://www.state.nm.us/tax/">www.state.nm.us/tax/</a> , or you can visit them at 5301 Central Ave. NE (NE corner of San Mateo & Central).		

FOR OFFICE USE ONLY		
BUSINESS REGISTRATION NUMBER	RECEIPT NUMBER	ZA, CSU # (If Applicable)
PROPERTY INFORMATION (Zone Designation, Atlas Page, UPC #, Legal Description, etc.)		
COMMENTS		



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### AGENT'S AUTHORIZATION FORM

This form is used to allow **someone other than the registered owner** of a specific parcel or property to act on behalf of the owner for a proposed permit and/ or request.

_____	
ADDRESS OF SUBJECT PROPERTY	
_____	_____
NAME OF PROPERTY OWNER *	PERMIT APPLICANT/AGENT'S NAME
_____	_____
ADDRESS OF PROPERTY OWNER	PERMIT APPLICANT/AGENT'S ADDRESS
_____	_____
CITY, STATE, ZIP	CITY, STATE, ZIP
_____	_____
PHONE NUMBER	PERMIT APPLICANT/AGENT'S PHONE NUMBER

I, \_\_\_\_\_, the legally registered property owner for the site located at \_\_\_\_\_, which is situated within the unincorporated area of Bernalillo County, hereby authorize the referenced individual and/ or company to submit applications and act as my agent concerning the following request:

**Please specify** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***\*If you are a legally assigned representative (i.e. manager, president, etc.) of a company/ corporation/estate which owns the property, please provide proof of your endorsement from that company/corporation/estate.***

_____	_____	_____	_____
PROPERTY OWNER'S SIGNATURE	DATE	PERMIT APPLICANT/AGENT'S SIGNATURE	DATE



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## PERMITTING CENTER

### BUSINESS REGISTRATION HOME OCCUPATION CHECKLIST

The application will be reviewed based on the information you have provided in your application. If approved, a business license certificate will be granted for your stated activities.

Please describe, in detail, your proposed activity on this site.

Will your business activity constitute a new use/activity at this location? If answered "YES" please list the previous activity: \_\_\_No \_\_\_yes

Will your business be the primary or most important use on the property? If answered "NO" please list the other uses. \_\_\_No \_\_\_yes

Will there be any employees of the business who live on the property? \_\_\_No \_\_\_yes  
If answered "yes", please provide additional information provided below:

Will merchandise be sold, displayed or manufactured on the property? \_\_\_No \_\_\_yes  
If answered "yes", please provide additional information below:

Will any business activity be conducted outside in the yard, patio or open courtyard? \_\_\_No \_\_\_yes  
If answered "yes", please provide additional information provided below:

Will the business occupy more than 25% of the floor area of the home? \_\_\_No \_\_\_yes  
If answered "yes", please provide a list of these:

Will the business occupy more than 600 square feet of a storage shed, garage, or workshop? \_\_\_No \_\_\_yes  
If answered "yes", please provide a list of these:

Will there be outside indication or evidence of the business (signage, storage, commercial parking, etc.)? \_\_\_No \_\_\_yes  
If answered "yes", please provide a list of these:

Will there be vehicular traffic to and from the property related to the business (customers, clients, delivery of merchandise, etc.)? \_\_\_No \_\_\_yes  
If answered "yes", please describe:

You will be required to provide adequate parking. If activity is related to a zoning permit, specific conditions will apply. You may schedule a meeting with a Planner (314-0350) if you have further questions.

*By signing my name on the business licenses application, I am verifying that the statements I have provided are true and accurate. I acknowledge that the activity I am conducting, on the site, is permissible per the Comprehensive Zoning Ordinance of Bernalillo County. I understand that that it is my responsibility to renew my business license every year, prior to the expiration date and that I must report any change in activity, address, ownership, or status.*

Printed Name

Signature

Date

The granting of Bernalillo County business registration does not waive any other applicable requirements or imply approval of other applicable standards. For certain activities, additional licenses, and/or approvals from local, state, and federal agencies may be required.



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## ZONING SECTION

## HOME OCCUPATION

### **HOME OCCUPATION**

In the unincorporated areas of Bernalillo County, people are allowed to operate certain types of commercial enterprises from their homes. These types of business activities are commonly referred to as “home occupations”. By definition, a home occupation must be incidental and secondary to the residential activities occurring on the property (ref. Section 5, “Home Occupation”).

The Zoning Ordinance allows for one (1) of the two types of home occupations be conducted from a residential zoned property. The following limitations have been established as department policy for home occupations requiring conditional use approval to ensure that the “business component” taking place on the site remains less intense than the primary activities:

- Customers, patrons, or clients can come to the property no more than four (4) days each week
- Up to five (5) clients per day with no more than one (1) client per session;
- All clients must be on a by-appointment-only schedule.

For businesses exceeding these limits, relocation of the activity to a commercially zoned property or securing of a Special Use Permit to operate from the site is required. However, be aware that other conditional use options may be available to the property owner, such as application for a “school” if swimming lessons, dance classes, or math tutoring is proposed for multiple clients at the same time.

### **TYPE 1 – PERMISSIVE USE:**

This type of home occupation is allowed to occur if:

- The business has a current Bernalillo County business registration.
- The business is clearly incidental and secondary to the use of the premises for a dwelling.
- The business has no exterior display (including signage).
- The business has no exterior storage of materials.
- The business does not emit nuisances (noise, odors, etc.).
- The business only employs members of the family who live in the dwelling.
- The business does not occupy more than 25% of the floor area of the dwelling or more than 600 square feet of an accessory building.

These types of home occupations may include medical transcription, telemarketing, Internet sales, or mail-order businesses.

### **TYPE 2 – CONDITIONAL USE:**

This type of home occupation is allowed to occur if:

- The business owner obtains conditional use approval from the Zoning Administrator to permit
  - Clients, customers, patients, patrons or similar individuals or groups to come to the property; and/or
  - Up to a single, additional employee to work on the site.
- All other standards of Type 1 home occupations are met.

These types of home occupations may include swimming lessons, counseling services, or a home office with up to one employee.

### **TO REQUEST HOME OCCUPATION APPROVAL**

TYPE 1	TYPE 2
Obtain a business tax identification number from the State of New Mexico Taxation and Revenue Department	Submit conditional use application
Complete the Bernalillo County Business Registration application- Home Occupation Form	\$75.00 fee/ attend Public Hearing
\$50.00 initial fee      Or      \$35.00 renewal fee	<b>IF APPROVED:</b> Meet all requirements of type 1 Home Occupation