



<b>For Office Use</b>	
HR # _____	Date Rec'd _____
RAC _____	
Sec _____, Area _____, Lot _____	

**APPLICATION FOR IN-HOME BUSINESS**

**Please deliver to:** Hickory Ridge Architectural Committee • 6175 Sunny Spring, Columbia, Maryland 21044  
 Phone: 410 730-7327 • FAX: 410 992-5843 • E-Mail: [kristina@hickoryridgevillage.org](mailto:kristina@hickoryridgevillage.org)

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
 PHONE: (DAY) \_\_\_\_\_ (EVENING) \_\_\_\_\_ E-MAIL: \_\_\_\_\_  
 TYPE OF DWELLING OR IMPROVEMENT: (i.e., Single Family, Townhouse, Condo) \_\_\_\_\_

\_\_\_\_\_  
 Owner's signature \_\_\_\_\_ Date \_\_\_\_\_

**NOTE: If a change applies to a condominium or townhouse, you may need to seek approval from your condominium/townhouse community. It is the applicant's responsibility to ensure compliance with all guidelines and/or restrictions. Consult with your condominium/townhouse association board.**

**Purpose and Description of Business:**

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

If more space is needed, use an additional page.

Number of vehicles owned by Property Residents \_\_\_\_\_ Number of parking spaces owned by or allocated to the Applicant \_\_\_\_\_

Will a truck or other vehicle be used? If so, how many, what type, and where will they be parked? \_\_\_\_\_

Describe the nature of parking requirements necessary to conduct profession or home industry and describe how parking requirements will be met. \_\_\_\_\_

Will any business materials be stored on the property? If so, what type and where will they be stored? \_\_\_\_\_

In addition to residents, how many people will be employed? \_\_\_\_\_

What will be the hours of operation? \_\_\_\_\_

Nature and frequency of delivery requirements: \_\_\_\_\_

Describe impact to neighbors (such as traffic, late night noise, odors) from the operation of this business. \_\_\_\_\_

**APPLICATIONS SUBMITTED WITHOUT ALL REQUIRED INFORMATION WILL NOT BE PROCESSED  
 AND WILL BE RETURNED TO THE PROPERTY OWNER(S) FOR COMPLETION.**

**ACKNOWLEDGEMENT OF AFFECTED AND/OR ADJACENT PROPERTY OWNER**  
**For Fast Track Process, a minimum of two signatures are required.**

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

**NOTE:** Your signature indicates awareness of intent, not approval or disapproval. Please be advised that certain exterior alterations are eligible for the Fast Track process and your signature may be used for that purpose. If you have questions, please call the village office at 410-730-7327.

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**FOR HICKORY RIDGE ARCHITECTURAL COMMITTEE USE ONLY**

**Approval of this application does not relieve you of your responsibility to comply with any provisions of the Howard County building and zoning codes, and Maryland state laws. Contact the Department of Inspections, Licenses, and Permits at 410-313-2455 for more information.**

\_\_\_\_\_ APPROVED  
NOTES(S): \_\_\_\_\_

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

\_\_\_\_\_ APPROVED WITH THE FOLLOWING PROVISION(S): \_\_\_\_\_

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

\_\_\_\_\_ DENIED FOR THE FOLLOWING REASON(S): \_\_\_\_\_

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

\_\_\_\_\_ Date of review

\_\_\_\_\_ RAC signature

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ARCHITECTURAL COMMITTEE FINAL ACTION:

Note: If you disagree with the decision, according to Article VII, Section 7.01, of the Village Covenants, a written appeal may be made within ten days of receipt:

\_\_\_\_\_ Date AC signature

Covenant Advisor  
6175 Sunny Spring  
Columbia, MD 21044