

Date Received: _____

LOG # _____

Village of Wilde Lake
Application for In-Home Profession or Industry
*Please consult the Wilde Lake Architectural Guidelines
and Maintenance Standards for application requirements.*

I. Applicant Information

Property Owner Name: _____

Property Address: _____

Phone: _____ E-mail: _____

II. Detailed Description of Profession or Home Industry

_____ (attach extra sheets if needed)

III. Signatures of Two Adjoining Property Owners

Adjoining Owner Name & Address: _____

Signature*: _____

Adjoining Owner Name & Address: _____

Signature*: _____

IV. Signatures of Property Owners Across the Street & Facing Applicant's Property

Owner Name & Address: _____

Signature*: _____

Owner Name & Address: _____

Signature*: _____

*Signature indicates an awareness of proposed architectural changes and does not constitute approval.

V. Signature of Townhouse or Condominium Association

(Required if in-home business will be conducted in or on a part of a
townhouse or condominium which is under the auspices of an HOA.)

Homeowners Association Name: _____

___ Approved ___ Disapproved ___ Awareness of Proposed Change

Officer's Signature: _____ Date: _____

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VI. Please answer the following questions:
(Check the Wilde Lake Architectural Guidelines and Maintenance Standards for full details of application requirements for In-Home Businesses.)

- 1) What are the hours of operation?
- 2) Will there be deliveries of supplies to the property?
- 3) How will the storage of business-related materials be accomplished?
- 4) How will the distribution of any products or materials be made?
- 5) How many employees will be working at the property?
- 6) What is the expected number of clients/customers/visitors per day?
- 7) How many vehicles are expected to park at any one time?
- 8) What number of trash/recycling bins will be set out on the property on pick-up days?
- 9) How do you perceive the overall impact on the neighborhood?

****Incomplete applications will be returned.****

VII. Applicant Signature

The undersigned hereby understands and agrees that no in-home business shall commence until Wilde Lake Architectural Committee approval is obtained.

Signature: _____ Date: _____

Mail or deliver completed application to:

Wilde Lake Community Association
Slayton House
10400 Cross Fox Lane
Columbia, Maryland 21044
Attn: Covenant Advisor

Phone: 410/730-3987
Fax: 410/730-6695 (fax)
e-mail: wl covenantadvisor@columbiavillages.org
Website: www.wildelake.org

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