## AFFIDAVIT OF NO-IMPACT HOME-BASED BUSINESS

COMMONWEALTH OF PENNSYLVANIA	:	
	:	SS
COUNTY OF YORK	:	

I, the undersigned, being first duly sworn according to law, deposes and says that:

1. I am the legal occupant of the property located \_\_\_\_\_

in East Manchester Township (the "Property").

2. I am engaged in a no-impact home-based business (the "Business") described as follows:

1. I have personal, first-hand knowledge of the Property, conditions of the Property, and the conduct of the Business.

2. I hereby certify to East Manchester Township the business or commercial activity satisfies the following requirements:

(1) The business activity shall be compatible with the residential use of the property and surrounding residential uses.

(2) The business employs and shall not employ any employees other than family members residing in the dwelling.

(3) There shall be no display or sale of retail goods and no stockpiling or inventory of a substantial nature.

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(4) There shall be no outside appearance of a business use, including but not limited to parking, signs or lights.

(5) The business activity does not and shall not use any equipment or process which creates noise, vibration, glare, fumes, odors or electrical or electronic interference, including interference with radio or television reception, which is detectable in the neighborhood.

(6) The business activity does not and shall not generate any solid waste or sewage discharge in volume or type which is not normally associated with residential use.

(7) The business activity shall be conducted only within the dwelling unit and does not and shall not occupy more than 25% of the habitable floor area.

(8) The business does not and shall not involve any illegal activity.

This affidavit is given to East Manchester Township for the approval of a no-impact home-based business on the Property. I verify that the statements made in this affidavit are true and correct to the best of my personal knowledge, information and belief. I understand that false statements made in this affidavit are made subject to the penalties of law set forth in 18 Pa.C.S. §4904 relating to unsworn falsification to authorities.

Name of Affiant:\_\_\_\_\_

Address:\_\_\_\_\_

Sworn and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 202\_\_.

Notary Public