

# Application for Accessory Tourist Lodging



- Tourist Lodging fee = \$108  
 Tourist Lodging Regulations Checklist.  
 Certification that notice of this application has been provided to the property owner,  
if owner is different from applicant.

A Tourist Lodging is a use within a residential zoning district composed of transient lodging provided within a single family dwelling having not more than five (5) guest rooms, located where the single family dwelling is actually used as such and the guest rooms are secondary to the single-family use, whether or not the guest rooms are used in conjunction with other portions of the dwelling.

Project Name: \_\_\_\_\_

Parcel ID Number: \_\_\_\_\_ Zoning: \_\_\_\_\_

Physical Street Address: \_\_\_\_\_

**Contact** (who should we contact about this project) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**Owner of Record** \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**Applicant** \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

## Owner/Applicant Must Read and Sign

I hereby certify that the information provided on this application and accompanying information is accurate, true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Signature of Owner, Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Daytime phone number of Signatory

**TOURIST LODGING REGULATIONS CHECKLIST  
(ZONING ORDINANCE SECTIONS 5.1.17 & 31.5)**

Each tourist lodging shall be subject to the following:

**SKETCH REQUIREMENTS**

A sketch plan of the site must be provided with requested items shown:

- Show the location of the dwelling unit used for the Tourist Lodging in relation to the property lines.
- Show the location of parking spaces to be used for the dwelling and the Tourist Lodging.
- Show the location of the access (ex. The driveway) to be used for the Tourist Lodging.
- Show the location, height, and lumens of any existing or proposed lighting to be used for the Tourist Lodging.
- Show the location of any signs to be used for the Tourist Lodging.
- Provide a floor plan of the single family dwelling proposed for the Tourist Lodging.

**Residency.** The single family dwelling unit used for the tourist lodging will be occupied by a resident of that same dwelling.

**Number guest rooms.** The Tourist Lodging may have up to five (5) guest rooms within the single family dwelling.

**How many guest rooms will the Tourist Lodging have?**

- 1    2    3    4   or    5

**Parking.** In addition to the parking required for a single family dwelling, the number of off-street parking spaces required by section 4.12.6 shall be provided. (SEE SKETCH REQUIREMENTS)

# of single family dwellings on the parcel \_\_\_\_\_ X 2 = \_\_\_\_\_  
 # of guest rooms on the parcel \_\_\_\_\_ X 1 = \_\_\_\_\_

Total number of parking spaces required for this Tourist Lodging \_\_\_\_\_

**Building code, fire and health approvals.** Before the zoning administrator approves a zoning clearance for a tourist lodging use under section 31.5, the owner of the parcel shall obtain approvals of the use from the building official, the fire official and the Virginia Department of Health.

- Attach Building Official approval of the use
- Attach Fire Official approval of the use
- Attach Virginia Department of Health approval of the use

**APPROVAL INFORMATION**

[ ] Approved as proposed   [ ] Approved with conditions   [ ] Denied

**Conditions** \_\_\_\_\_

**Zoning Official** \_\_\_\_\_ **Date** \_\_\_\_\_

**FOR OFFICE USE ONLY**

ATL # \_\_\_\_\_

Fee Amount \$ \_\_\_\_\_ Date Paid \_\_\_\_\_ By who? \_\_\_\_\_ Receipt # \_\_\_\_\_ Ck# \_\_\_\_\_ By: \_\_\_\_\_

**CERTIFICATION THAT NOTICE OF THE  
APPLICATION HAS BEEN PROVIDED TO THE LANDOWNER**

*This form must accompany zoning applications (Home Occupation, Zoning Clearance, Zoning Administrator Determinations or Appeals, Sign Permits, Building Permits) if the application is not the owner.*

I certify that notice of the application, \_\_\_\_\_  
[County application name and number]

was provided to \_\_\_\_\_ the owner of record of Tax Map  
[name(s) of the record owners of the parcel]

and Parcel Number \_\_\_\_\_ by delivering a copy of the application in the  
manner identified below:

\_\_\_\_\_ Hand delivering a copy of the application to \_\_\_\_\_  
[Name of the record owner if the record owner is a  
person; if the owner of record is an entity, identify the recipient of the record and the recipient's  
title or office for that entity]

on \_\_\_\_\_  
Date

\_\_\_\_\_ Mailing a copy of the application to \_\_\_\_\_  
[Name of the record owner if the record owner is a person;  
if the owner of record is an entity, identify the recipient of the record and the recipient's title or  
office for that entity]

on \_\_\_\_\_ to the following address:  
Date

\_\_\_\_\_  
[address; written notice mailed to the owner at the last known address of the owner as shown on  
the current real estate tax assessment books or current real estate tax assessment records satisfies  
this requirement].

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Print Applicant Name

\_\_\_\_\_  
Date