

FOR OFFICE USE ONLY

CLE #

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



Zoning Clearance for Family Day Home

Application Fee = \$62.40

\$60 + \$2.40 Technology Surcharge

Family day home checklist items (See page 2). *Please schedule a pre-application meeting with staff prior to submitting an application to go ensure that all requirements are met.*

Certification that notice of this application has been provided to the property owner, if owner is different from applicant.

Family day home: Child day program offered in the dwelling unit of the provider or the dwelling unit that is the home of any of the children in care for one (1) through twelve (12) children under the age of thirteen (13), exclusive of the provider's own children and any children who reside in the home, when at least one child receives care for compensation. For the purposes of this definition, a child day program is a regularly operating service arrangement for children where, during the absence of a parent or guardian, a person has agreed to assume responsibility for the supervision, protection, and well-being of a child under the age of thirteen (13) for less than a twenty-four (24) hour period. **THIS CLEARANCE FORM IS ONLY REQUIRED IF YOU PROVIDE CHILDCARE FOR 5 – 12 CHILDREN UNDER THE AGE OF THIRTEEN (13), EXCLUSIVE OF THE PROVIDER'S OWN CHILDREN.**

PARCEL INFORMATION

Tax Map and Parcel: _____ Existing Zoning _____

Parcel Owner: _____

Parcel Address: _____ City _____ State _____ Zip _____

Applicant (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 _____

Owner/Applicant Must Read and Sign

I hereby apply for approval to conduct the Family Day Home identified above and certify that this address is my legal residence. I also certify that I have read the restrictions on Family Day Homes, that I understand them, and that I will abide by them.

Signature of Owner/Applicant

Date

Print Name

Daytime phone number of Signatory

Reviewer

Date

FAMILY DAY HOME CHECKLIST
(FROM ZONING ORDINANCE SECTIONS 5.1.56 & 31.5)

APPLICANT MUST HAVE THE FOLLOWING INFORMATION TO APPLY:

- Description of your proposed family day home use, including number of children you are licensed to care for, number of employees, how long you have been licensed, and any additional information to address the zoning regulations below.
- Sketch of your property (a GIS map, physical survey, or plat of the property may be used) that shows the following:
 - a. Show the location of parking spaces used for the dwelling and Family Day Home (*see parking requirements below*)
 - b. Show the location of the access (ex. Driveway) for the Family Day Home

PLEASE READ ALL OF THE INFORMATION BELOW AND THEN CHECK EACH BOX SO THAT IT IS CLEAR THAT YOU UNDERSTAND THE REQUIREMENTS FOR FAMILY DAY HOMES:

- Traffic.** The additional traffic generated by a family day home, excluding trips associated with the dwelling unit, shall not exceed twenty-four (24) vehicle round trips per day. For the purposes of this section, a “vehicle round trip” means one vehicle entering and exiting the site. *See waiver information below.*
- Parking.** Each family day home shall provide one (1) parking space plus one (1) parking space for each additional employee. The parking spaces may be located on-site, on the street where authorized by law, or in a parking lot safe and convenient to the family day home. (For example, a single family dwelling needs 2 parking spaces and 1 space for family day home)
- Additional improvements to entrance and access.** A zoning clearance shall not be issued if, after review of any site, additional improvements are necessary to protect public health or safety. In conjunction with each application for a zoning clearance, the zoning administrator shall identify, if necessary, the applicable design and improvements required that are at least the minimum necessary to protect public health and safety by providing safe ingress and egress to and from the family day home site, safe vehicular and pedestrian circulation on the site, and the control of dust as deemed appropriate in the context of the use. *The zoning administrator may consult with the county engineer or the Virginia Department of Transportation regarding the minimum design and improvements for the entrance and access.*
- State licensure.** Each family day home shall acquire and maintain the required licensure from the Virginia Department of Social Services. The owner or operator of the family day home shall provide a copy of the license to the zoning administrator. The owner or operator’s failure to provide a copy of the license to the zoning administrator shall be deemed to be willful noncompliance with the provisions of this chapter. *(Please provide a copy of your license.)*
- Inspections by fire official.** The Albemarle County fire official is authorized to conduct periodic inspections of the family day home. The owner or operator’s failure to promptly admit the fire official onto the premises and into the dwelling unit to conduct an inspection in a manner authorized by law shall be deemed to be willful noncompliance with the provisions of this chapter.
- Relationship to other laws.** The provisions of this section are supplementary to all other laws and nothing herein shall be deemed to preclude application of the requirements of the Virginia Department of Social Services, Virginia Department of Health, Virginia State Fire Marshal, or any other local, state or federal agency. *(Your application will be forwarded to the Building Official, Social Services, and Fire Marshal to confirm any applicable requirements are met.)*
- Notice to abutting lot owners.** At least thirty (30) days prior to acting on the zoning clearance, the zoning administrator shall provide written notice of the application for a zoning clearance to the owner of each abutting lot under different ownership than the lot on which the proposed family day home would be located. The notice shall identify the proposed family day home, its size and capacity, its location, and whether a special exception under subsection (see below) is requested. The notice shall invite the recipient to submit any comments before the zoning clearance is acted upon. *(Staff will provide you a list of your neighbors that will be notified under this requirement. See section below for process if neighbor objection is received.)*

WHEN BOARD OF SUPERVISORS APPROVAL IS NEEDED (NO ADDITIONAL FEES REQUIRED):

- Neighbor Objection received-Special exception.** If the zoning administrator receives a written objection to the family day home from the owner of an abutting lot within thirty (30) days after the notice was mailed or delivered, the zoning clearance shall not be approved until after the applicant obtains a special exception for the family day home as provided in sections 33.5 and 33.9. In acting on a special exception, the board shall consider whether the proposed use will be a substantial detriment to abutting lots.

- Traffic waiver.** The limitation on the number of vehicle round trips per day may be waived or modified by special exception. In acting on a special exception, the board shall consider whether the waiver or modification of the number of vehicle round trips per day will change the character of the neighboring agricultural area or the residential neighborhood, as applicable, and whether the additional vehicle trips per day will be a substantial detriment to abutting lots. Notice of the application for a special exception shall be posted as provided in section 33.4(m)(2).

REVIEW PROCESS

<u>BY-RIGHT:</u>	<u>BOARD OF SUPERVISORS APPROVAL NEEDED:</u>
<ol style="list-style-type: none"> 1. Submit Zoning Clearance application and required information (see checklist above). 2. Staff will review for completion and mail abutting owner notification to your neighbors who will have 30 days and to review and comment on your request. 3. Staff will forward a copy of your application to the Fire Marshal, Building Official, and Social Services for their review, comment, and approval. 4. Staff will schedule a time to visit your property. 5. Staff will approve application if requirements have been met. 	<ol style="list-style-type: none"> 1. Submit Zoning Clearance application and required information (see checklist above). 2. Staff will review for completion and mail abutting owner notification to your neighbors who will have 30 days and to review and comment on your request. 3. Staff will forward a copy of your application to the Fire Marshal, Building Official, and Social Services for their review, comment, and approval. 4. Staff will schedule a time to visit your property. 5. Staff will schedule your application to be heard at next available Planning Commission meeting. 6. A public notice sign will be posted at your property. 7. Following the Planning Commission meeting, staff will coordinate the date of the next available Board of Supervisors meeting. 8. Board will take action to approve or deny your application. 9. Staff will pick-up public notice sign.

APPROVAL INFORMATION

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

Conditions

Zoning Official _____ **Date** _____

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

This form must accompany this zoning application if the application is not signed by the owner of the property.

I certify that notice of the application for, _____
[Name of the application type & if known the assigned application #]

was provided to _____
[Name(s) of the record owners of the parcel]

the owner of record of Tax Map and Parcel Number _____

by delivering a copy of the application in the manner identified below:

_____ Hand delivery of 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