



ZONING ENFORCEMENT DIVISION
201 N. Stone Avenue, 1st Floor
Tucson, Arizona 85701-1207
(520) 740-6675

APPLICATION FOR BED & BREAKFAST CONDITIONAL USE PERMIT

OWNER: _____ PHONE: _____

ADDRESS: _____ CITY: _____ ZIP: _____

APPLICANT (if not owner): _____ PHONE: _____

ADDRESS: _____ CITY: _____ ZIP: _____

PROPERTY ADDRESS: _____ ZONE: _____

TAX CODE(S): _____

LEGAL DESCRIPTION: _____

_____ TOWNSHIP, RANGE SEC.: _____

BASE MAP: _____ LOT DIMENSIONS: _____ LOT AREA: _____

DESCRIPTION OF BED & BREAKFAST (INCLUDE SIZE OF ESTABLISHMENT AND NUMBER OF GUEST BEDROOMS:

STATE THE REASONS WHY THE USE IS PROPOSED AND WHY YOU THINK IT WOULD BE COMPATIBLE WITH THE SURROUNDING AREA:

ESTIMATED STARTING DATE: _____ ESTIMATED COMPLETION DATE: _____

THE FOLLOWING DOCUMENTS ARE REQUIRED:

- 1. Site Plan and Floor Plan
 - a. 5 copies are needed for Type 1 (In accordance with Pima County Fee Schedule)
 - b. 25 copies are needed for Type 2 (In accordance with Pima County Fee Schedule)
(*Make check payable to Pima County Treasurer)
- 2. Assessor's Map showing location and boundaries of the property.
- 3. Assessor's Property Information showing ownership of the property.
- 4. Letter of Authorization if applicant is not the owner
- 5. Biological Impact Report - For Type 2 permit requests (See Biological Impact Report Guidelines)

I, the undersigned, represent that all the facts in this application are true to the best of my knowledge.

Signature of Applicant

Date

Print Name

Applicant Phone Number

Applicant agrees to provide staff with written proof of notice to the United States Fish and Wildlife Service of this conditional use request at least 15 days prior to the date of the public hearing. Failure to do so may result in cancellation of the public hearing. In addition, the applicant or authorized representative must appear in person at the public hearing to present the request, otherwise the case may be dismissed.

Please initial here: _____

A request for continuance of an advertised application or a change in original request by the applicant must be accompanied by an additional fee.

OFFICE USE ONLY

Case #: _____ Case Title: _____

Type: _____ Fee: _____ Receipt Number: _____ Hearing Date: _____

Notification Area: _____ Sections: _____

Zoning Approval: _____

Special Conditions: _____
