



SPECIAL USE PERMIT APPLICATION LEVEL II HOME BUSINESS

Shenandoah County Office of Community Development

600 N. Main St., Suite 107

Woodstock, VA 22664

Phone: 540-459-6185

Fax: 540-459-6193

<http://shenandoahcountyva.us/zoning/>

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SPECIAL USE PERMITTING PROCESS

starts with...

AN IDEA

Call 540-459-6185 to talk to a Shenandoah County Planning And Zoning staff for consultation on the idea of a potential use.

Submit a Zoning Use Worksheet for a Zoning Determination from the Zoning Administrator

**Discussions With
VDOT and VDH**

**Technical Review
Team Meeting**

TRT Meetings serve as pre-application meetings where you can speak to all agencies such as VDOT, VDH, Fire Marshall, and others before an application is submitted to determine feasibility. All are welcome to have a TRT, but the Zoning Administrator or a designee will determine if a TRT meeting is required. If not required, an applicant must reach out to VDOT and VDH on their own prior to application submittal. One may request a TRT at any time before an application is submitted.

Submit Special Use Permit Application

Applications are due 8 weeks prior to a joint public hearing with the Planning Commission. An application must be considered complete before it is eligible for a joint public hearing. Staff will share all comments from agencies with the applicant at least two weeks prior to the public hearing. An AD in the local newspaper will run two weeks and one week prior to the public hearing. Letters will be sent to adjoining landowners two weeks prior to the public hearing. It is advised that applicants speak with neighbors prior to letters being sent.

Joint Public Hearing

The Planning Commission and Board of Supervisors hold a joint meeting to hear the applicant's proposal, reducing the time required for the review process. The Planning Commission will hear a presentation from staff and entertain a presentation from the applicant as well as comments, letters, and other responses from the general public.

Board Of Supervisors Final Decision

While the Board of Supervisors tend to make final decisions their last meeting the month of the public hearing, the Board may table a Special Use Permit up to one year, or 365 days.

Applicants who are denied may reapply after one year, or 365 days, since denial.

Meet Agency Requirements

Applicants must adhere to agency comments prior to the start of operations.

Congratulations! You Can Start Business

SPECIAL USE PERMIT APPLICATION INSTRUCTIONS

Please use the checklist below to ensure all steps are taken to complete your application for a Special Use Permit. All Special Use Permits must adhere to Chapter 165 of the ordinances of Shenandoah County (available online at <http://www.ecode360.com/SH1548>). A completed application packet is submitted to the Zoning Administrator and will be decided by the Board of Supervisors.

Site plan approval can be obtained in conjunction with a Special Use Permit request or at a later date. If you are unfamiliar with this process, please contact the County Zoning Administrator at 540-459-6185 to set an appointment to meet.

SPECIAL USE PERMIT CHECKLIST

Completed and signed application form.
Zoning Determination issued by Zoning Administrator.
Completed Technical Review Team Meeting (if required by Zoning Administrator/designee).
If applicant is acting as the agent to represent the owner, a completed Power of Attorney form.
Basic site plan showing the proposed use.
A copy of the deed (may be obtained from Clerk of Circuit Court) showing evidence of ownership for the property in question.
Receipt showing taxes have been paid in full (may be obtained from Shenandoah County Treasurer's office).
A completed disclosure of the equitable ownership of the real estate to be affected and a notarized disclosure stating whether or not any members of the Shenandoah County Planning Commission or Board of Supervisors have any interest in such property. Disclosure attached.
Completed review by all required agencies.
Application fee (noted on next page).

APPLICATION REVIEW AND ACTION

Once the applicant submits the complete application, the Special Use Permit request is scheduled for the next joint public hearing of the Planning Commission and Board of Supervisors. The applicant or agent is required to appear at this hearing to present the application and to answer any questions.

This hearing normally begins at 7:00 p.m. and takes place in the Board Room of the Shenandoah County Government Office in Woodstock, Virginia. The applicant must take responsibility for contacting the Zoning Administrator to find out the exact date, time, and location in case any changes are made to the normal schedule. After the Planning Commission makes its recommendation, usually at the hearing meeting, the Board of Supervisors will take up the matter at a scheduled meeting, normally the 4th Tuesday of the month at 7:00 p.m. at the same location. Again the applicant is responsible for calling the Zoning Administrator to confirm the date, time, and location of the Board meeting.

Site Plan

The preliminary site plan should show the proposed use of the property, if known, if the special use permit is approved. A description of site plan requirements is included in this packet. A final site plan must be submitted within a year of the approval of the preliminary site plan.

Agency Comments

The Zoning Administrator determines for each application the appropriate agencies that must comment on the application. The applicant should contact those agencies to review the proposed use prior to the joint public hearing.

SUP Application Fee:

Make checks payable to "Shenandoah County Treasurer".

Level II Home Business

\$400.00

REGULATIONS FOR LEVEL II HOME BUSINESSES

A Home Business is a commercial activity which is incidental and secondary to the use of the dwelling as a residence, but generally exceeds the requirements for home occupations.

Level II Home Businesses may be permitted, with the issuance of a special use permit, in zoned districts which allow residential uses. The fee for a Special Use Permit for a Level II Home Business is \$400.00.

The person conducting the Home Business must be the owner of the dwelling in which the Business is to be located or a tenant of the dwelling in which the occupation is to be located. If the operator is a tenant, written approval of the owner must be provided. The Home Business cannot be operated by individuals other than the owner, a tenant, or members of their family residing in the dwelling. A Level II Home Business can employ up to two employees. One off-street parking space shall be provided for each employee, in addition to the two parking spaces per dwelling unit required for residential purposes. For off-street parking requirements for multifamily housing, please see the Shenandoah County Zoning Ordinance, Section 165-86(B).

The Home Business must be clearly incidental or secondary to the use of the dwelling as a residence. Home Business activities shall not occupy a floor area, including accessory buildings, of more than twenty-five (25%) percent of the square footage of the living area of the dwelling. An accessory building may be used only for storage of inventory in conjunction with a Level II Home Business, unless otherwise authorized during approval of the Special Use Permit. The exterior of the dwelling must show no evidence of the attendant Home Business other than one unilluminated two square foot sign. There shall be no outside display of products, goods, or commodities in conjunction with the Home Business.

For the purpose of this application, living area is livable floor space and excludes open porches, stoops, unfinished attic, and floor area of any accessory building.

Family is defined as one (1) or more persons related by blood, adoption or marriage, living and cooking together as a single housekeeping unit; or a number of persons, but not exceeding four (4) persons, living and cooking together as a single housekeeping unit, not related by blood, adoption, or marriage.

SHENANDOAH COUNTY
OFFICE OF COMMUNITY DEVELOPMENT
600 N. MAIN ST., SUITE 107
WOODSTOCK, VA 22664
540-459-6185



SPECIAL USE PERMIT APPLICATION

PROJECT NAME: _____

Applicant / Owner

Applicant Name: _____ **Address:** _____

Phone: _____ **Email:** _____

If Applicant Is Not The Property Owner, Please Provide The Following:

Owner Name: _____ **Address:** _____

Phone: _____ **Email:** _____

Property

Project Size: _____ acre sqft **Parcel Address / Location:** _____

Parcel Number(s): _____

Project

Use **Applied For:** _____ **Current Use:** _____

Please Describe The Proposed Use: _____

Proposed Changes To Existing Buildings/Structures: _____

Proposed New Buildings/Structures: _____

Proposed Temporary Structures: _____

Has A Previous Application Been Made For This Use? Y / N _____

Do You Plan To Reach Out To Your Neighbors? Y / N If Yes, When? _____

Project Details

Hours Of Operation: _____

Parking Spots: _____ Paved / Gravel / Other: _____ Number Of Restrooms: _____
(This Requires VDH Approval)

Expected Noise Level: _____

Lighting: _____ Signage: _____

Amount Of Land Disturbance: _____ Expected Daily Customer Count: _____

Current Water And Sewer Facilities: _____

Proposed Water And Sewer Facilities: _____

Space For Emergency Vehicles To Turn Around: Y / N Fire Safety Equipment: _____
(Fire Extinguisher, Fire Alarm, Sprinkler, Etc.)

Level II Home Business Details

Type Of Occupation: _____

Description Of Occupation: _____

Number Of People Engaged In Occupation (Excluding Applicant): _____

Number Of Members Of Your Family Residing In Dwelling: _____

Number Of Off-Street Parking Spots Provided On Parcel: _____

Total Living Area in Dwelling: _____ sqft Total Floor Area To Be Used For Occupation: _____ sqft

Number Of Accessory Buildings To Be Used With This Occupation: _____

Expected Number Of Clients/Customers To Come In-Person Daily: _____

Please note the following regulations as they relate to Level II Home Businesses:

ITEM	DESCRIPTION	LEVEL II HOME BUSINESS
I	Allowed as an accessory use in zones:	A-1, C-1, R1, R-2, R-3
II	Home Occupation/Business Permit issued by Zoning Administrator	NO
III	Allowed by Special Use Permit (Issued by Board of Supervisors)	YES
IV	Owner operated or renter operated with owner approval	YES
V	Can be operated by people other than family residing in the dwelling	NO
VI	Number of Employees	More than 2 possible
VII	Off-Street Parking (for multifamily housing, see Section 165-86(B))	2 spaces per dwelling unit plus 1 per employee
VIII	Business area as a percentage of living area, maximum allowed	25%
IX	Use of accessory buildings (i.e. garage, barn, shed)	YES
X	Additional traffic above residents and employees	Possible
XI	Customers allowed on site	Possible
XII	Business use visible	NO
XIII	Outside display of Products	NO
XIV	Signs Allowed	2 sqft maximum

I (we), the undersigned, do hereby certify that the information provided in this application and associated documents is complete and correct. I (we) understand that in granting approval of an application for special use, the Board of Supervisors may require compliance with certain conditions and that such approval shall not be considered valid until these conditions are met.

Applicant Signature: _____ Date: _____

Owner Signature: _____ Date: _____

OFFICE USE ONLY		
SUP#: _____	Fee: _____	Date Received: _____
AD Dates: _____	_____	Public Hearing Date: _____
Planning Commission Recommendations: _____		

Board Recommendations: _____		

BOS Action Date: _____		Clerk Of The Board: _____

COMMUNITY COLLABORATION FORM (OPTIONAL)

In accordance with VA § 15.2-2204, Shenandoah County is required to notify all adjoining landowners, post a sign on the property, and publish a notice in the local newspaper two weeks and one week prior to the hearing. While we cannot require applicants to work with their neighbors, we highly recommend doing so prior to official County letters and notices being issued. The form below demonstrates a template for collaborating with community members and applicants are not restricted to this format in any shape or form:

What are past concerns in the community relevant to the proposed use? _____

Considerations on how the proposed use will take into account such concerns: _____

Please meet with adjoining landowners either all-together or individually to fill out these questions with words and/or phrases based on the shared values heard from community members:

Characteristics of a good community:

Characteristics of a bad community:

Best case scenario if proposal approved:

Worst case scenario if proposal approved:

To be completed after discussions with community: # of adjoining landowners spoken to: ____ / ____

Need in community for proposed use: _____

How proposed use will not be a detrimental impact on adjacent lots: _____

On my honor, this information has come from the all of the community and not just myself:

Signed: _____ Date: _____



SPECIAL LIMITED POWER OF ATTORNEY

County of Shenandoah, Virginia

Web Site: <http://www.shenandoahcountyva.us/community>

Office of Community Development

Mailing Address: 600 N. Main St., Suite 107, Woodstock, VA 22664

Phone: (540) 459-6185 Fax: (540) 459-6193

Know All Individuals By These Presents: That I (We)

Name: _____ Telephone: _____

Address: _____

the owner(s) of all those tracts or parcels of land ("Property") conveyed to me (us), by deed recorded in the Clerk's Office of the Circuit Court of the County of Shenandoah, Virginia, by

Instrument No. _____, on Page _____

and is described as Tax Map Number(s): _____

do hereby make, constitute and appoint:

Name: _____ Telephone: _____

Address: _____

To act as my true and lawful attorney-in-fact and in my (our) name, place and stead with full power and authority I (we) would have if acting personally to file planning applications for my (our) above described Property, including:

- Rezoning (With Voluntary Agreements)
- Preliminary Subdivision
- Final Subdivision
- Special Use Permit (With Voluntary Agreements)
- Administrative Modification
- Administrative Site Plans

My attorney-in-fact shall have the authority to offer voluntary agreements and to make amendments to previously approved voluntary agreements except as follows:

This authorization shall expire one year from the day it is signed, or until it is otherwise rescinded or modified.

In witness thereof, I (we) have hereto set my (our) hand and seal this _____ day of _____, 20 _____

Signature(s): _____

State of Virginia, City/County of _____, To-wit:

I, _____, a Notary Public in and for the jurisdiction aforesaid, certify that the person(s) who signed to the foregoing instrument and who is (are) known to me, personally appeared before me and has acknowledged the same before me in the jurisdiction aforesaid this _____ day of _____, 20 _____

Notary Public:

My Commission Expires:

DISCLOSURE OF OWNERSHIP/INTEREST TEMPLATE

County of Shenandoah, Virginia

Web Site: <http://www.shenandoahcountyva.us/community>

Office of Community Development

Re: County Ordinance Section 165-114

In accordance with Section 165-114 of the Ordinances of Shenandoah County, Virginia, it is submitted that the owners of the subject real estate which is the subject of an application for Special Use Permit are as follows:

1. _____
Name & address of owner
2. _____
3. _____

Further, this letter is a disclosure under Section 165-114, sworn to under oath before a Notary Public, and the undersigned, first being duly sworn, states that member(s) (or immediate household members) of the Shenandoah County Planning Commission or the Shenandoah County Board of Supervisors _____ [have / do not have] interest in the aforesaid property, either individually, by ownership of stock in a corporation owning such land, partnership, as the beneficiary of a trust, or the settlor of a revocable trust.

Sincerely,

Signature: _____

COMMONWEALTH OF VIRGINIA
COUNTY OF SHENANDOAH, TO-WIT:

I, _____, a notary Public in and for the jurisdiction aforesaid, certify that the person(s) who signed the forgoing instrument and who is (are) known to me, personally appeared before me and has acknowledged the same before me this _____ day of _____, 20____.

Notary Public

Notary registration number

My commission expires: _____

APPLICATION PROCESS EVALUATION

We would like to learn how we might improve this process. Please complete this form and submit it to the Department of Planning And Zoning or email it to the staff member you are working with. You can submit it to us separately from the application if you wish. You may also submit it anonymously.

1. Which type of application did you complete?

- Rezoning (With Voluntary Agreements)
- Preliminary Subdivision
- Final Subdivision
- Special Use Permit (With Voluntary Agreements)
- Administrative Modification
- Administrative Site Plans

2. Which part, if any, of the application process did you find particularly difficult? (Check as many as you wish)

- Learning The SUP Process
- Preliminary Site Plan
- Achieving A Zoning Determination
- Finding A Copy Of The Property Deed
- Technical Review Team Meeting
- Obtaining A Receipt Showing Taxes Paid In Full
- Community Collaboration Form
- Completing The Disclosure Form
- Power Of Attorney Form
- Other: _____

3. Did you have a discussion with a staff member before submitting the application? Yes / No

4. Were you able to receive the assistance or information that you needed from the staff? Yes / No

5. What portion of this process took the longest for you?

- Learning The SUP Process
- Preliminary Site Plan
- Achieving A Zoning Determination
- Finding A Copy Of The Property Deed
- Technical Review Team Meeting
- Obtaining A Receipt Showing Taxes Paid In Full
- Community Collaboration Form
- Completing The Disclosure Form
- Power Of Attorney Form
- Other: _____

6. What do you think could have been done differently to make this process quicker?

7. Do you have any suggestions about what we could do to make this process work better?
