

#### Packet for Bed & Breakfast Establishment Use

- **1.** <u>Application Packet</u>. The "Application Packet" for a Special Use Permit for a Bed & Breakfast Establishment Use includes the following:
  - Application Form (This form must be filed out completely)
  - Supporting Information (Each "standard" listed must be addressed)
  - Site Plan Checklist (Use this checklist to prepare the Site Plan)
  - Fire & Safety Compliance Checklist (Use this checklist to prepare for the required Inspection)
  - Permission to Place a "Zoning Action Pending" Sign on Private Property (This form must be signed by the property owner)
  - Adjoining Property Owner Support Statement (Completion of this form is optional)

Be sure to complete and submit <u>all the required materials</u> that are part of this Application Packet. Failure to do so will result in a delay in accepting your application until it is complete.

- 2. <u>Approval Process</u>. Applicants must submit all required information and materials to the Department of Planning and Housing. Within three days after the application is received, staff will determine if the application is complete for review and will notify the applicant. Staff will then review the application and contact the applicant with any questions and to discuss the possible timeline for Board consideration. The request will be processed only if sufficient facts are submitted with this application to support consideration by the Zoning Board of Adjustment.
- 3. <u>Fire-Safety Requirements</u>. All Bed & Breakfast Establishments must be in compliance with the fire safety regulations included in Ames Municipal Code Chapter 13, Division VIII. After the application is received, a Fire-Safety Inspection will be scheduled. Fire-Safety Compliance must be verified by the inspector before the Special Use Permit Public Hearing is scheduled.
- **4. Primary Residence.** A primary residence is the only place where a person has a true, fixed, and permanent home, and to where, whenever the person is briefly and temporarily absent, the person intends to return. A person may have only one primary residence. Acceptable forms of primary residence status include a driver's license/state-issued identification, utility bill, or recent piece of mail matching the name and address on the application.
- 5. <u>Site Plan and Floor Plan Information</u>. The applicant shall submit a reproducible, black line Site Plan along with a Floor Plan, drawn to scale, that clearly shows the property proposed for use as a Bed & Breakfast Establishment. These shall be reproducible, black line drawings, each on paper no larger than 11" x 17". A Site Plan checklist is included in this packet. Materials submitted with the application or presented as evidence during the public hearing will not be returned and must be kept as part of the public record.

#### 6. Zoning Board of Adjustment Meetings.

The Zoning Board of Adjustment considers the facts presented by the applicant in the application and testimony given under oath at the public hearing, and makes the final decision, based on the standards in the Zoning Ordinance.

The Board meets on the second Wednesday of the month at 6:00 p.m. either in the City Council Chambers or via Zoom. Additional meetings may be held on the fourth Wednesday of the month, January through October. The Board must approve, deny, or modify the Special Use Permit application within 60 days of the public hearing.

- 7. <u>Notification.</u> The City will mail a notice to all property owners within 200 feet of the property that an application for a Special Use Permit has been filed and a sign will be placed on the property indicating that a "Zoning Action" is pending. This notification is done so that concerned individuals will have an opportunity to learn about what is being proposed and can present information on this matter to the Zoning Board of Adjustment.
- 8. <u>Submittal and Filing Fee.</u> The complete application and filing fee must be submitted to the Department of Planning and Housing. All required information and materials must be included. The Special Use Permit filing fee is \$150. The fee is nonrefundable. Online payment is available. The Special Use Permit filing fee is in addition to any other review or inspection fees. *For your convenience, you may mail, email, or drop off the completed application with the required fee:*

Mail: Department of Planning and Housing P.O. Box 811 Ames, Iowa 50010 Dropoff: City Hall, 2<sup>nd</sup> Floor Dept of Planning and Housing 515 Clark Avenue Ames, Iowa 50010

IF YOU HAVE ANY QUESTIONS WHILE COMPLETING THIS APPLICATION, PLEASE CONTACT THE DEPARTMENT OF PLANNING AND HOUSING.

Phone: 515-239-5400

E-mail: planning@cityofames.org

Bed & Breakfast Establishment as a Principal Use (The following is a summary only and does not reflect the entire code.)

Туре	Bed & Breakfast Establishment	
	THE LEWIS CO.	
Description	Owner's Primary Residence Owner Required to be Present	
Approval Process	Special Use Permit [not transferrable]	
Fire Safety Requirements	Special Request Inspection	
Maximum # of Bedrooms	5 B&B Bedrooms	
Maximum # of Guests	2 Adults per B&B Bedroom	
# of Concurrent Guest Contracts & Lodging Units per Parcel	1 Guest Contract per Approved B&B Bedroom	
Meals	Breakfast Only  No Maximum	
Maximum # of Days / Year		
Maximum Stay	31 Consecutive Days	
Parking	1 Reserved Space per Guest Bedroom, Plus 1 Space for Owner	
Allowed in These Zoning Districts	A, RL, RM, UCRM, RH, NC, S-SMD, O-SFC, FS-RL, & FS-RM	

### Application Form for Use as a Bed & Breakfast Establishment

This Application Form must be filled out completely by the Property Owner before it can be accepted for review by the City of Ames. Approval will be granted only if sufficient facts are presented with the application and that all the criteria set out in Ames Municipal Code, Chapter 29 have been met.

Obtaining this Special Use Permit does not absolve the applicant from obtaining any other applicable permits.

1.	Property Address:
	(Unit / Suite)
2.	Parcel ID & Legal Description of the Property: (attach, if lengthy)(https://www.storycountyiowa.gov/1131/BeaconProperty-Records)
3.	What is the property's Zoning Classification?(https://www.storycountyiowa.gov/1131/BeaconProperty-Records)
4.	Description of Operations:
	Please provide a description of the operations of the business (such as, owner's role, check-in and out, occupancy, parking, breakfast service (if applicable), how impact to neighbors will be minimized, advertising, etc.) Attach on separate sheet if more space is needed.
5.	Off-Street Parking Requirements:
	Bed & Breakfast Establishments - 1 reserved space per guest bedroom, plus 1 space for the owner.
	Parking must comply with the dimensional, location, and surfacing requirements of Section 29.406 of the Zoning Ordinance. This includes restrictions on front yard parking. Please contact the City of Ames Planning & Housing Department at (515) 239-5400 with any questions.
	Number of Legal, Paved (9' x 19') Off-Street Parking Spaces Existing:
	Explain how the request meets this standard.

6.	Guest Bedrooms: (parking limitations may restrict allowable occupancy)
	The Zoning Board of Adjustment will determine the number of bedrooms specific to the dwelling unit for use as a Bed & Breakfast Establishment. No more than five guest bedrooms may be approved, each with a maximum occupancy of two adults.
	Total Number of Legal Bedrooms Existing in the Dwelling Unit:
	Number of Legal Bedrooms Requested for Bed & Breakfast Use:
	Number of Adult Guests Requested (see limitation above):
7.	Property Owner of Record: (Add a person's name if owner is a corporation or other group entity)
	Name:
	Name:
	Street Address:
	City, State, Zip:
	Telephone:(Cell) (Other)
	E-mail address:
8.	<b>Primary Resident:</b> (Include documentation. Acceptable forms of primary residence status include a driver's license/state-issued identification, utility bill, or recent piece of mail matching the name and address on the application.)
	Name:
	Address:
	Telephone:(Cell) (Other)
	E-mail address:
9.	Operational Checklist:
	☐ I intend to make the dwelling unit available as a Bed & Breakfast Establishment and I will contract it for consecutive periods less than 31 days.
	☐ I agree that if any meals are served to guests, meal service will be limited to breakfast and only offered to guests residing in the structure or persons living in the premises. Commercial kitchens are prohibited.

Effective Date: December 22, 2020

(Sig	nature) (Date)
	her signature may be substituted for the Property Owner's Signature(s).
8.	The Special Use Permit is not transferrable to any subsequent owner of the property.
7.	The Special Use Permit shall be deemed expired and void if after one year, the dwelling is no longer being used as a Bed & Breakfast Establishment.
6.	Obtaining the Special Use Permit does not absolve the applicant from obtaining other necessary permits or licenses from the City of Ames or from other applicable agencies.
5.	With this application, I agree to have the dwelling unit available for City verification and inspection for compliance.
4.	All of the information submitted in support of the application is factual. If any information submitted in support of this application is false or misleading, the application may be denied. Any Special Use Permit issued based on false or misleading information may be suspended or revoked.
3.	The Special Use Permit for a Bed & Breakfast Establishment Use will not be granted unless sufficient facts are presented with the application and at the Zoning Board of Adjustment meeting to support a finding that <u>all</u> of the requirements and standards for granting a Special Use Permit have been met.
2.	The dwelling unit is the primary residence of the property owner.
1.	Applicant is the legal owner of the dwelling unit being considered under this application.
się	gning this form, the applicant is acknowledging the following:
	I agree to maintain a Guest Register.
	I agree to respond to any complaints in a reasonably timely manner and will maintain a record of actions taken in response.
	I agree to comply with the payment of required hotel/motel taxes as required under State Law.
	I agree to maintain compliance with fire-safety requirements included on the attached checklist.

(Date)

(Signature)

(Print Name - Owner 2)

#### Supporting Information for Bed & Breakfast Establishment

(This form must be filled out completely before your application will be accepted)

(Note: The applicant's explanation of how the request meets each standard may be attached on a separate sheet if sufficient space is not provided.)

The Zoning Board of Adjustment can grant a Special Use Permit for Use as a Bed & Breakfast Establishment only if all of the criteria are met. In order to facilitate review of this application, the applicant must address each of the criteria set forth in Sections 29.1302, 29.1503(4)(a), and 29.1503(4)(b) of the Zoning Ordinance as included below:

**General Standards.** The Zoning Board of Adjustment shall review each application for the purpose of determining that each proposed use meets the following "General Standards" set forth in 29.1503(4)(a), which are listed below. Note: Do not answer N/A. This is an opportunity to describe operations of the business to enable the Zoning Board of Adjustment to find adequate evidence that each use in its proposed location will be compatible with the neighborhood and will:

(1)	Land Use Policy Plan (LUPP).		
	Explain how the request meets this standard.		
(ii)	Be designed, constructed, operated and maintained so as to be harmonious in appearance with the existing or intended character of the general vicinity and that such use will not change the essential character of the area in which it is proposed.		
	Explain how the request meets this standard.		
(iii)	Not be hazardous or disturbing to existing or future uses in the same general vicinity.		
	Explain how the request meets this standard.		

(iv)	Not be hazardous or disturbing to existing or future uses in the same general vicinity.  Explain how the request meets this standard.
(v)	Be served adequately by essential public facilities and services such as highways, streets, police, fire protection, drainage structure, refuse disposal, water and sewage facilities, and/or schools.
	Explain how the request meets this standard.
(vi)	Not create excessive additional requirements at public cost for public facilities and services.  Explain how the request meets this standard.
(vii	Not involve uses, activities, processes, materials, equipment or conditions of operation that will be detrimental to any person, property or general welfare by reason of excessive production of traffic, noise, smoke, fumes, glare, or odors.
	Explain how the request meets this standard.
(vii	i) Be consistent with the intent and purpose of the Zone in which it is proposed to locate
	such use.  Explain how the request meets this standard.

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10.	<b>Residential Zone Standards.</b> The Zoning Board of Adjustment shall review each application for the purpose of determining that each proposed use in a residential zone meets the "Residential Zone Standards", set forth in 29.1503(4)(b), which are listed below. Note: This is an opportunity to describe operations of the business to enable the Zoning Board of Adjustment to find adequate evidence that each use in its proposed location will:
i)	Not create excessively higher levels of traffic than the predominant pattern in the area and not create additional traffic from the proposed use that would change the street classification and such traffic shall not lower the level of service at area intersections.
	Explain how the request meets this standard.
	Not create a noticeably different travel pattern than the predominant pattern in the area Special attention must be shown to deliveries or service trips in a residential zone that are different than the normal to and from work travel pattern in the residential area.
	Explain how the request meets this standard.
(iii)	Not generate truck trips by trucks over 26,000 g.v.w. (gross vehicle weight) to and from the site except for food delivery vehicles, waste collection vehicles and moving vans.
	Explain how the request meets this standard.

Explain how the request meets this standard.

(iv)

Not have noticeably different and disruptive hours of operation.

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(v)	Be sufficiently desirable for the entire community that the loss of residential land is justifiable in relation to the benefit.
	Explain how the request meets this standard.
(vi)	Be compatible in terms of structure placement, height, orientation, or scale with the predominate building pattern in the area.
	Explain how the request meets this standard.
(vii	Be located on the lot with a greater setback or with landscape buffering to minimize the impact of the use on adjacent property.
	Explain how the request meets this standard.
(vii	i) Be consistent with all other applicable standards in the zone.
	Explain how the request meets this standard.

#### Site Plan Checklist for Bed & Breakfast Establishment

(This form must be filled out completely before your application will be accepted)

The applicant shall submit a Site Plan along with a Floor Plan, drawn to scale, that clearly shows the property proposed as a Bed & Breakfast Establishment. The plans shall be reproducible, black line drawings each on paper no larger than 11" x 17" (unless alternative format is authorized by staff) and shall include, at a minimum, the following information:

Dimensioned property lines
Abutting streets and alleys
Location and size of all existing buildings and structures (Include distances to all property
lines and distances between buildings and structures.)
Location and dimensions of parking areas (including available garage parking), individual
parking spaces and drive aisles, driveways, curb cuts, and other parking and drive
improvements with surfacing material identified (Differentiate between existing and
proposed.)
Building floor plans indicating existing and proposed usage, interior floor area and/or patron
floor area, including bedrooms with dimensions.
Other pertinent information necessary to fully understand the proposed operations of the Bed
& Breakfast Establishment use and how potential impact to adjacent properties is minimized
(e.g. location or landscaping).

### Fire & Safety Compliance Checklist

This form must be filled out completely before your Application will be accepted. The Application cannot be taken forward for Special Use Permit consideration until the dwelling unit is inspected and compliance met. City of Ames can grant a Special Use Permit for a Bed & Breakfast Establishment use, only if all of the following criteria are met.

Guest Lodging Bedrooms. A "Guest Lodging Bedroom" must meet the fo	•	□ Na
<ul> <li>Does each bedroom contain a minimum of 70 sq. ft.?</li> <li>Does each bedroom have an emergency escape window?</li> </ul>	□ Yes □ Yes	□ No □ No
<ul> <li>Is the ceiling height of each bedroom a minimum of 7 feet?</li> </ul>	□ Yes	□ No
<ul> <li>Number of Guest Lodging Bedrooms Existing in the Dwelling Unit:</li> </ul>		
Carbon Monoxide & Fire Protection Systems. All systems, devices, a or a fire, actuate an alarm, or suppress or control a fire, or any combination than operable condition at all times in accordance with the International Fire Co	nereof shall be n	
Portable Fire Extinguishers. Fire extinguishers shall be supplied as follows	:	
<ul> <li>At least one charged and operable fire extinguisher shall be provided.</li> <li>Fire extinguishers shall be maintained on an annual basis by a trained income.</li> </ul>	dividual.	
My property is in compliance as described above:	□ Yes	□ No
Smoke Detectors. Smoke alarms shall be installed and maintained at all of	the following loc	ations:
<ul> <li>On the ceiling or wall outside of each separate sleeping area in the immedent in each room used for sleeping purposes.</li> <li>In each story within a dwelling unit, including basements and cellars.</li> </ul>	diate vicinity of t	oedrooms.
My property is in compliance as described above:	□ Yes	□ No
<u>Carbon Monoxide Detectors.</u> Carbon monoxide alarms may be comb devices provided they meet the location requirements. Carbon monoxide det maintained in dwellings and dwelling units at all of the following locations:		
<ul> <li>In each bedroom where a fuel-burning appliance or fireplace is located.</li> <li>In the immediate vicinity of every room used for sleeping purposes appliance or fireplace, or on the ceiling of the room containing a forced-ai</li> </ul>	•	fuel-burning
My property is in compliance as described above:	□ Yes	□ No
<b>Inspection.</b> All premises being considered for licensure as Guest Lodging the City for the purpose of investigating and determining compliance witl Should the premises not be made available for inspection, it will be grounds f	h the Guest Lo	dging code.
Property Owner(s):		
(Signature)		
(Print Name)		

(Date)

# <u>Permission to Place a "Zoning Action Pending" Sign</u> <u>on Private Property</u>

This form must be filled out completely before your application will be accepted.

Section 29.1500(2)(d)(iii) of the Zoning Ordinance, requires that notice sl subject property. One notice sign shall be posted for each property. along the perimeter of the subject property in locations that are highly vis prior to the public hearing.	Required signs shall be posted
The owner of property at	
Property Owner(s):	
No other signature may be substituted for the Property Owner's Signatur affidavit of agent authority.	re(s), unless accompanied by an
I understand that one or more signs will be placed on the property sev request by the Zoning Board of Adjustment and may remain on the propapproved or denied by the City.	
(Signature)	(Date)
(Print Name - Owner 1)	
(Signature)	(Date)
(Print Name - Owner 2)	

&

# **Special Use Permit**

# <u>Adjoining Property Owner Statement</u> (Completion of this form by the applicant is Optional.)

To Whom It May Concern:				
We, the undersigned, own property adjoi	ining	_ Ames, Iowa.		
It is our understanding that	is our understanding that			
has filed an application with the Zoning E	Board of Adjustment to allow a Bed & Breakfas	s <b>t</b>		
Establishment use at this location.				
As adjoining property owners, we have n Breakfast Establishment use at this locat	no objections to the issuance of a Special Use P tion.	ermit for <b>a</b> Bed		
NAME	ADDRESS	DATE		