



Planning Department

(541) 535-2050 Fax (541) 535-5769

112 W 2nd Street/PO Box 330, Phoenix, OR 97535

SHORT TERM LODGING APPLICATION File No. ZC- _____ Fee \$75

NOTICE TO APPLICANT: Applicants are advised to review the list of submittal requirements indicated on each application form prior to submitting an application. **Failure to provide complete and/or accurate information may result in delay or denial of your request.**

APPLICANT _____

Mailing address _____

Phone _____ **Fax** _____ **Email** _____

Applicant's interest in property _____

Signature _____ **Date** _____

I do hereby affirm that I have read the regulations contained in the City of Phoenix Ordinance pertaining to home occupations and have agreed to conduct the proposed home occupation in accord with said regulations, including any additional conditions that may be imposed by the City at the time of approval. I also understand that failure to comply with these regulations may be grounds for revocation of the Home Occupation Permit.

PROPERTY OWNER _____

Mailing address _____

Phone _____ **Fax** _____ **Email** _____

Property Owner's Consent: I do hereby certify that I am the legal owner of record of the property described above and as such, I am requesting that the City of Phoenix process this application in accord with state and local ordinances.

Signature _____ **Date** _____

If same as applicant, mark SAME. If there is more than one property owner, please attach additional sheets as necessary.

SITE LOCATION AND DESCRIPTION

Address _____ **Tax Map #(s)** _____ **Tax Lot #(s)** _____

Zoning R-1 R-2 R-3

Type of Structure Single Family Detached Home Duplex
 Manufactured home in park Multi-family (3+ units)

Square footage of structure _____ **Number of guest rooms** _____

Bed and Breakfasts may be approved if they are consistent with the standards outlined in Section 2.2.9.J of the Phoenix Land Development Code. Please describe your proposed operation with specific responses addressing these criteria (below and reverse).

Describe the proposed business _____

OFFICE USE ONLY.

This institution is an equal opportunity provider and employer.

120 day time limit Accepted as complete _____ Final decision by _____
DLCD 45-day notice required Y/N Date mailed _____ Date of first hearing _____
Planning Commission hearing date _____ Notice mailed _____
Notice to media Publication date _____ Emailed _____
Notice of Decision Date mailed _____ Appeal deadline _____
Associated applications _____

Please check the following boxes to indicate you understand the requirements below.

Home Occupation standards:

- Structure maintains the appearance of a residence
- No outside storage of any materials related to the Home Occupation
- No more than one full-time non-family employee on the site at any time
- No signs except as allowed per LDC 3.6.5A.4.c
- No more than one commercially licensed vehicle on the site
- No more than eight vehicle visits per day (*Not applicable to B&Bs*)
- Business will not operate before 7:00 a.m. and later than 8:00 p.m. (*Not applicable to B&Bs*)
- There will be no impacts from the business affecting other properties (noise, glare, vibration, smoke, etc.).
- No vehicle repairs or painting
- No food sales

Bed and Breakfast standards:

- No more than one guest room for every 400 square feet of gross floor living area, plus one unit for the proprietor of the business
- Total number of guest rooms shall not exceed 5
- Length of stay may not exceed 15 days in any 30-day period.
- One off-street parking space for each guest room shall be required, in addition to the off-street parking required for the primary use.
- On-street parking along the property frontage may substitute for the additional parking requirements.
- Single- family dwellings are eligible for uses as Bed and Breakfasts. Apartment dwellings and non-residential structures, such as institutional buildings, warehouses, recreational vehicles, and churches are not eligible. ADUs may be used.
- Breakfast is the only meal to be provided and shall be served only to guests of the Bed and Breakfast Inn no later than 12:00 noon.
- Property shall have address clearly marked and visible from the street.
- Property owner/operator shall obtain and maintain an annual City of Phoenix Business License.
- Property owner/operator shall collect Transient Room Tax and remit to City as required by PMC Chapter 3.16.

Electronic submittals to accompany this application form are encouraged. All text submittals should be provided in a Microsoft Word document; plans and other images should be formatted as a PDF.

Use additional sheets if necessary.

SUBMITTAL REQUIREMENTS

The following items must be received in order to process an application. If you need assistance completing the forms, please contact the Planning Department. If you do not have a copy of the deed to your property to verify ownership, contact the Jackson County Assessor at (541) 774-6059 or <https://jacksoncountyor.org/assessor>

1. Original, signed **Application form**. This information is public record and must be reproduced so please type or write clearly using dark ink.
2. All information required above and below, unless specifically waived by the Director.
3. The appropriate **fee**.