

(town header to go here)

## Town of Wachapreague Special Use Permit Application

Applicant's Name \_\_\_\_\_

Mailing address \_\_\_\_\_

Phone Numbers: home: \_\_\_\_\_ work: \_\_\_\_\_ cell: \_\_\_\_\_

Email address: \_\_\_\_\_

Location and legal description of property: \_\_\_\_\_

Tax map/Parcel ID: \_\_\_\_\_

Zoning Classification \_\_\_\_\_

Name and telephone number for local emergency contact \_\_\_\_\_

Description of proposed use of property \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Bed & Breakfast applicants only) Number of: Rooms to rent \_\_\_\_ Parking spaces available \_\_\_\_

I certify that the information above is true and accurate to the best of my knowledge, and I will comply with all provisions of the Code for the Town of Wachapreague.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

===== Office Use Only =====

( ) APPROVED by Planning Commission: \_\_\_\_\_ Date \_\_\_\_\_

( ) DENIED by Planning Commission: \_\_\_\_\_ Date \_\_\_\_\_

REASON: \_\_\_\_\_

( ) APPROVED by Town Council: \_\_\_\_\_ Date \_\_\_\_\_

( ) DENIED by Town Council: \_\_\_\_\_ Date \_\_\_\_\_

REASON: \_\_\_\_\_