

TOWN OF ONANCOCK

15 NORTH STREET
ONANCOCK, VIRGINIA 23417

SPECIAL USE PERMIT APPLICATION

Applicant's Name: _____

Address: _____

Telephone: _____ Date: _____

Location & Legal Description of Property Proposed* : _____

No. of total guests (for homestay applicants only): _____

No. of proposed parking spaces (for homestay applicants only): _____

Parcel Number: _____

Zoning Classification: _____

Name and telephone number for local emergency contact: _____

Description of Proposed Use: _____

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**I certify that the information listed 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 Onancock.**

Signature of Applicant

Date

***For requests to operate homestays, the applicant must attach a site plan that provides location of the home, setbacks from all property lines and the street, no. of proposed parking spaces, and traffic flow patterns entering and leaving the property. The zoning administrator will conduct a site visit of the property as part of the review of the application.**