



APPLICATION FOR CONDITIONAL USE BED AND BREAKFAST

FOR CITY USE ONLY
APPLICATION NO.: _____ DATE RECEIVED: _____ FEE RECEIVED: _____

OWNER NAME _____
OWNER ADDRESS/CITY/STATE/ZIP _____
OWNER PHONE _____ OWNER EMAIL _____

APPLICANT NAME _____
APPLICANT ADDRESS/CITY/STATE/ZIP _____
APPLICANT PHONE _____ APPLICANT EMAIL _____

REPRESENTATIVE NAME _____
REPRESENTATIVE ADDRESS/CITY/STATE/ZIP _____
REPRESENTATIVE PHONE _____ REPRESENTATIVE EMAIL _____

PROPERTY INFORMATION
LOCATION (STREET ADDRESS) _____
PARCEL ID _____ GROSS ACRES _____
CURRENT ZONING DISTRICT DESIGNATION: MF-7.5 MF-10 MF-12.5 MF-15
DOES THE OWNER/APPLICANT HAVE ANY OWNERSHIP INTEREST IN CONTIGUOUS PROPERTY? YES NO
LIST ALL INDIVIDUALS AND ENTITIES WITH AN OWNERSHIP INTEREST IN THE PROPERTY. LIST SHOULD INCLUDE, WITHOUT LIMITATION, ANY AND ALL GENERAL PARTNERS, CORPORATE OFFICERS, AND MANAGERS OF LIMITED LIABILITY COMPANIES. PLEASE DISCLOSE ANY INTEREST FOR A CONTRACT OF SALE: _____

OWNER'S CERTIFICATION
As the owner of the property listed above, I hereby certify that this application and data is a true and correct representation of the facts concerning this request. In the event that the applicant or representative is different from the owner, I hereby authorize _____ to act on my behalf in representing this petition. The filing of this application does not constitute automatic approval by the Board of Adjustment & Appeal. If the request is approved, I will obtain all necessary permits and comply with all applicable codes and regulations pertaining to the use of the subject property.
Signature of Owner: _____ Printed Name: _____
The foregoing instrument was acknowledged before me on this _____ day of _____, 20____ by _____, who is personally known to me or has produced _____ as identification.
(NOTARY STAMP)

NOTARY'S SIGNATURE

SUBMITTAL REQUIREMENTS *(Please include electronic versions of the boundary survey and application package)*

1. APPLICATION FORM: Signed and notarized. Attach additional sheets as necessary.
2. APPLICATION PACKAGE: Please refer to [Sec. 103-14.8.7](#) of City code for guidance about required amenities and your presentation to the BAA.
3. TITLE CERTIFICATION LETTER: Letter showing present titleholder of record and initial date of acquisition, no more than 60 days old and prepared by a title company or licensed attorney in the State of Florida.
4. PROPERTY SURVEY: A recent (one year old or less) Boundary Survey of the property.
5. FEE: \$1,500 application fee. Make checks payable to City of Dunedin.

PLEASE NOTE:

To operate a Bed and Breakfast within any multifamily (MF) zoning district, a Conditional Use Permit must be approved by the Board of Adjustment and Appeal (BAA).

This includes the following multi-family zoning districts.

- MF-7.5 Multifamily Residential
- MF-10 Multifamily Residential
- MF-12.5 Multifamily Residential
- MF-15 Multifamily Residential

IMPORTANT: Please be advised that a Conditional Use Bed and Breakfast in any multi-family zoning district must be an owner-occupied family home structure (one building), with no more than six sleeping rooms, which has been modified to serve as a transient public lodging establishment, which provides the accommodation and meal services generally offered by a bed and breakfast, and which is recognized as a bed and breakfast in the community or by the hospitality industry. In addition, there are minimum life safety and parking requirements along with other standards and required amenities.

A complete list of rules and regulations are found in [Sec. 103-14.8](#) of City code.

Submit completed application to:

Joan McHale, Business Manager
Community Development Department
737 Loudon Avenue
Dunedin, FL 34698

Any questions, please contact jmchale@dunedinfl.net or (727) 298-3198.