



**Albemarle County**  
Community Development  
401 McIntire Rd., North Wing  
Charlottesville, VA 22902  
Phone 434.296.5832 | Fax 434.972.4126

**FOR OFFICE USE ONLY**

Fee Amt: \$158

Receipt #: 119916

HS#

Date Paid:

Ck#

2019-019

11/21/19

9395

By:

By:

Paula Bar W.D. Tom Thompson

JP

**1. Applicant/Owner Information**

NAME:	<u>WILLIAM D. THOMPSON</u>		
E-MAIL ADDRESS:	<u>tom@chville.net</u>	PHONE:	<u>434-973-1416</u>
MAILING ADDRESS:	<u>200 IPSWICH PLACE, CHARLOTTESVILLE, VA 22901</u>		

**2. Homestay Information**

TAX MAP AND PARCEL NUMBER (OR ADDRESS, IF UNKNOWN):	<u>PARCEL ID: 04400000009000 VISION ID: 8872</u>		
ZONING:	ACREAGE:	HOMESTAY NAME:	
<u>RA</u>	<u>2.053</u>	<u>IVY FARMS APARTMENT</u>	
RESPONSIBLE AGENT NAME:	<u>DREW THOMASSON - GUESTHOUSES RESERVATION SVCS</u>		
RESPONSIBLE AGENT EMAIL:	<u>drew@vaguesthouses.com</u>	RESPONSIBLE AGENT PHONE:	<u>434-979-7264</u>
RESPONSIBLE AGENT ADDRESS:	<u>621 ALTA VISTA AVENUE, CHARLOTTESVILLE, VA 22902</u>		

**3. Verification of Requirements**

NUMBER OF GUEST BEDROOMS:	USING ACCESSORY STRUCTURES?	2 FORMS PROOF OF RESIDENCY PROVIDED?	FLOOR PLAN SKETCH PROVIDED?
<u>2</u>	YES <input type="radio"/> NO <input checked="" type="radio"/>	YES <input checked="" type="radio"/> NO <input type="radio"/>	YES <input checked="" type="radio"/> NO <input type="radio"/>
PARKING REQUIRED:	TOTAL HOMESTAY USES ON PARCEL		
Dwelling <u>2</u>	<u>1</u>		
Number of Guest Rooms <u>+</u>			
Total Off-Street Parking <u>2</u>			

**4. Applicant Signature**

I hereby apply for approval to conduct the homestay identified above, and certify that this address is my legal residence. I also certify that I have read the restrictions on homestays, that I understand them, and that I will abide by them.

SIGNATURE OF OWNER/APPLICANT:	DATE:
<u>William D. Thompson</u>	<u>11-19-2019</u>
PRINT NAME:	DAYTIME PHONE NUMBER:
<u>WILLIAM D. THOMPSON</u>	<u>434-973-1416</u>

Approved [ ] Approved with Conditions [ ] Denied [ ]

Zoning Official: \_\_\_\_\_

Date: \_\_\_\_\_

VDH Approval Date: \_\_\_\_\_ Building Official Approval Date: \_\_\_\_\_ Fire Marshal Approval Date: \_\_\_\_\_

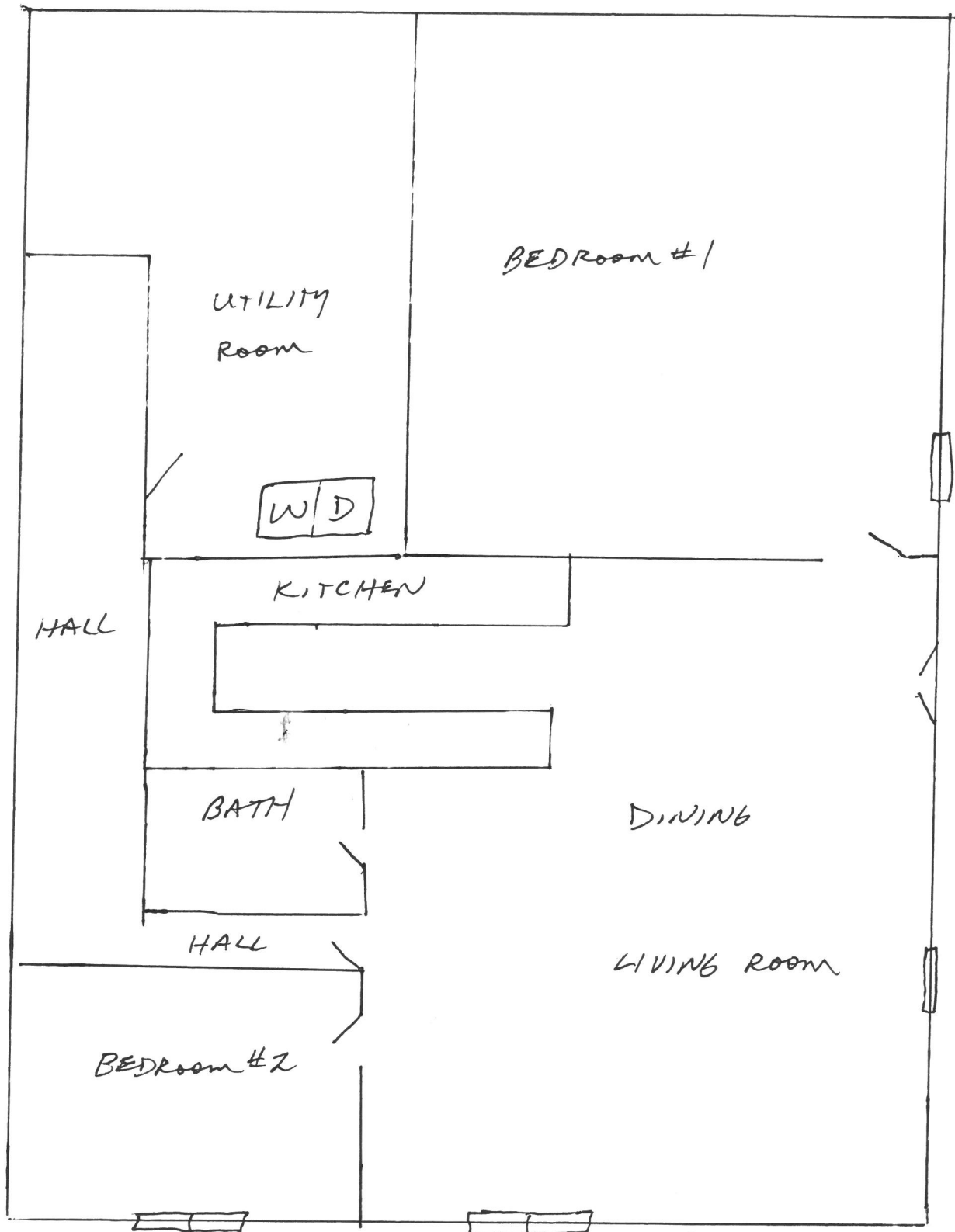
Conditions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SUBMIT THIS PAGE, YOUR SKETCH, YOUR VDH APPROVAL (IF REQUIRED), AND YOUR \$158 APPLICATION FEE TO COMMUNITY DEVELOPMENT, 401 MCINTIRE ROAD, CHARLOTTESVILLE, VA 22902**

# IVY FARMS APARTMENT



HS 2019-19

# COUNTY OF ALBEMARLE

## APPLICATION FOR A SPECIAL EXCEPTION

- ☒ Request for a waiver, modification, variation or substitution permitted by Chapter 18 = \$457 <sup>PMD</sup>
- ☐ Variation to a previously approved Planned Development rezoning application plan or Code of Development = \$457

OR

- ☐ Relief from a condition of approval = \$457

### Provide the following

- ☒ 3 copies of a written request specifying the section or sections being requested to be waived, modified, varied or substituted, and any other exhibit documents stating the reasons for the request and addressing the applicable findings of the section authorized to be waived, modified, varied or substituted.

### Provide the following

- ☐ 3 copies of the existing approved plan illustrating the area where the change is requested or the applicable section(s) or the Code of Development. Provide a graphic representation of the requested change.
- ☐ 1 copy of a written request specifying the provision of the plan, code or standard for which the variation is sought, and state the reason for the requested variation.

Project Name : \_\_\_\_\_

Current Assigned Application Number (SDP, SP or ZMA) \_\_\_\_\_

Tax map and parcel(s): 44-90 <sup>VISION ID: 8872</sup>  
PARCEL ID: 0440000009000

Applicant / Contact Person WILLIAM D. THOMPSON

Address 200 IPSWICH PLACE City CHARLOTTESVILLE State VA Zip 22901

Daytime Phone# ( 434 ) 973-1416 Fax# ( 434 ) 973-4734 Email tom@chville.net

Owner of Record WILLIAM D. or POLLY B. THOMPSON

Address 200 IPSWICH PLACE City CHARLOTTESVILLE State VA Zip 22901

Daytime Phone# ( 434 ) 973-1416 Fax# ( 434 ) 973-4734 Email tom@chville.net

November 21, 2019

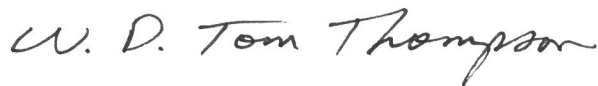
Ms. Rebecca Ragsdale  
Homestay Application Review  
County of Albemarle  
401 McIntire Road, Room 133  
Charlottesville, VA 22902

Re: Application for Special Exception

Dear Ms. Ragsdale,

Per our discussion yesterday, here is the written request for a Special Exception under Zoning Ordinance section 5.1.48(i)(1)(ii) for the reduction in minimum applicable yards for a structure used in part for a homestay. In my opinion, there is no detriment to any abutting lot and there is no harm to the public health, safety or welfare.

Thank you in advance for your consideration.

A handwritten signature in cursive script that reads "W. D. Tom Thompson".

William D. "Tom" Thompson  
200 Ipswich Place  
Charlottesville, VA 22901  
434-973-1416  
tom@chville.net