

Complete this application in its entirety and submit pages 4 and 5 along with the required materials (including any required supplements) as listed on page 2 to the address below:

City of Hampton Community Development Department, Planning Division 22 Lincoln Street, 5th Floor Hampton, Virginia 23669 OFFICE USE ONLY Date Received:

RECEIVED

APR 2 0 2018 CDD 5TH FLOOR

Case Number: UP	18	_00005	
Case Mullinel.			-

1. PROPERTY INFORMATION								
Address or Location 232 S. Armiste	ad Ave., Hampton 23669							
LRSN 2001912	Zoning District 2 - 1							
Current Land Use Bed & Breakfast In	n & Wedding Chapel							
Current Land Use Bed & Breakfast In Proposed Land Use Bed & Break fast I	nn & Wedding Chapel							
The proposed use will be in: 🛛 an existing building	☐ a new addition ☐ a new building							
2. PROPERTY OWNER INFORMATION (an Individual or a legal entity may be listed as owner)								
Owner's Name Wankford & Joyce Bla	air							
Address 232 S. Armistead Ave city Hampton State Va. Zip 23469								
Phone 757-722-2888 Email Stay @ Magtouse Hampton com								
3. APPLICANT INFORMATION (If different from owner)								
Applicant's NameSame_								
Address City	State Zip							
Phone Email								
Agent's Name City State Zlp								
Address City	State Zlp							
Phone Fmail								
Phone Email								

5. CERTIFICATION FOR LEGAL ENTITY PROPERTY OWNERS

Name of Legal Entity

Complete this section only if the property owner is **not** an individual but rather a legal entity such as a corporation, trust, LLC, partnership, diocese, etc. as specified in Step 2 above.

"I hereby submit that I am legally authorized to execute this application on behalf of the fee-simple owner of this property. I have read this application and it is submitted with my full knowledge and consent. I authorize city staff and representatives to have access to this property for inspection. The information contained in this application is accurate and correct to the best of my knowledge."

Name(s), title(s), signature(s), and date(s) of authorized representative(s) of the legal entity (attach additional page if necessary):

Signed b	DV:			
- J	Name (printed)	<u> </u>	, Its (title)	
	Signature		Date	
	Name (printed)		, Its (title)	
	Signature	- 1 a	Date	
	Name (printed)		, Its (title)	
	Signature		Date	
6. CER	TIFICATION FOR INDIVI	DUAL PROPERTY OWNERS		
Complete	e this section only if the pro	pperty owner is an individual or i	ndividuals.	
my full kı	nowledge and consent. I a	uthorize city staff and represent	ave read this application and it is submitted atives to have access to this property for and correct to the best of my knowledge."	with
Name(s)), signature(s), and date(s) of owner(s) (attach additional	page if necessary):	
Name (p	orinted) Joyce A	+.Hill-Blair		
	e Jose al	Holloen	Date <u>(o / Ce / 1 8</u>	
Name (p	orinted) LANKFOR	d Black		
Signatur	e ulfid	01-	Date <u>U/U/18</u>	
P. Laurence		OFFICE USE ONLY		
	☐ Application Form	☐ Narrative Statement	☐ Supplemental Form (if required)	
	☐ Application Fee	☐ Survey Plat	☐ Additional materials (if required)	