



San Bernardino County

Land Use Services Department, Code Enforcement Division

San Bernardino County
Government Center
385 N. Arrowhead Ave., 1st Floor
San Bernardino, CA 92415-0185
Phone (909) 387-8311
Fax (909) 387-3249

Hesperia Office
15900 Smoketree St
Hesperia, CA 92345
Phone 760-995-8140
Fax (760) 995-8167

Rancho Office
8575 N Haven Ave, Ste 130
Rancho Cucamonga, CA 91730
Phone (909) 948-5075

SPECIAL USE PERMIT

BED AND BREAKFAST

GENERAL PROCEDURES

1. Submit application and fees – County staff will use the checklist to determine whether your application may be accepted.
2. Application processing – The code enforcement officer will review the application and will approve the permit as quickly as possible, if he/she is able to make the required findings and all standards have been met.

CHECKLIST OF SUBMITTAL MATERIALS

Please use this checklist as you assemble the materials for the submittal of your Special Use Permit application. If you have any questions about the items requested or if you wish to obtain information on processing schedules, please call the Code Enforcement Division at the numbers listed above.

Section A – Fees

1. _____ Check or money order made payable to San Bernardino County Code Enforcement in the correct amount.

Application Fee	\$ 549.00
Renewal Fee	\$ 225.00
Fee for an Appeal to the Planning Commission	\$1,050.00
Fee for an Appeal to the Board of Supervisors	\$ 700.00

Note: The appeal fee is paid by the individual or agency filing the appeal.

Section B - County Documents

2. _____ Completed Application.

Section C - Other Documents

3. _____ Three copies of a plot plan.
4. _____ One copy of the Conditions of Approval.
5. _____ One copy of each letter guaranteeing water and/or sewer service.
6. _____ One copy of any brochure, picture, drawing, advertisement, etc., of the Bed and Breakfast facility (if applicable).

Special Use Permit – Bed and Breakfast APPLICATION

Complete all sections of this application. If you believe a question does not apply, mark it "N/A". Do not leave any blank spaces. If you have any questions about items requested on this form, please call Code Enforcement at the appropriate office listed at the top of the cover page.

Section 1 - Applicant Data. (This is the person who the county will contact regarding this application).

Applicant Name _____

Mailing Address _____

City _____ Zip _____

Phone _____ FAX No. _____ E-Mail _____

Other person(s) to be notified in case of Emergency _____

Section 2 – Property Data

1. Assessor's Parcel Number (APN): _____
(This may be obtained from the Assessor's Office)

2. Present Land Use District (Zoning): _____
(This must be obtained from the Building and Safety Division)

3. Conditional Use Permit Index Number: _____

4. General location of property: Include street address and location from nearest street or intersection, indicating which side of the street:

Street Address _____

City _____ Zip _____

Location: _____

5. Number of rooms applying for: _____ Number of bathrooms: _____

6. Property Dimensions: _____ Total Square Footage: _____

7. Square footage of residence: _____

8. Number of parking spaces: _____

9. Utilities:

A. Sewage Disposal:

Public Sewer
Name of Serving District: _____

Septic System

Describe size of existing septic tank and indicate leach field or seepage pit:

Describe size of proposed septic system:

B. Water Source:

- Water Source
Water meter pipe size and minimum pressure (this information can be obtained from your water company):

A letter guaranteeing service for the Bed and Breakfast, signed by the water purveyor must be attached.

- Well: Number of dwellings connected to well and location of well (if applicable):

Date well was drilled: _____

C. Electric Supply Source:

Name of Serving Company: _____

D. Gas Supply Source:

- Natural Gas
Name of Serving Company: _____
- Other (please specify) _____

10. Special use operational information:

- A. Number of customers received per day, week, year, or other time increments:

B. Materials used and their manner of delivery to and from location (including toxic/flammable chemicals or materials):

C. Maximum number of employees or residents occupying site and/or attending functions at any given time:

D. List other agencies for which permits / clearance must be obtained:

Section 4 – Signature:

I certify under penalty of perjury that the above information is true and correct that I have read and understand and will abide by San Bernardino County Code, Title 8, Division 4.

I understand that my permit may be voided for non-compliance of the conditions set forth in the approval.

Applicant's Signature

Date

Property Owner's Signature

Date