

# SUPPLEMENT PERMIT APPLICATION FOR GROUP HOMES

City of Tempe  
Community Development Department  
31 East 5<sup>th</sup> Street, Garden Level  
Tempe, Arizona 85281  
Phone (480) 350-4311  
Fax (480) 350-8677



This supplement is used in conjunction with the standard Project Submittal form to properly classify the proposed facility and secure clearances prior to issuance of a building permit. Expiration of the building permit will result in expiration of clearances. Please provide the following information:

GROUP HOME INFORMATION – REQUIRED			
GROUP HOME NAME		GROUP HOME TYPE (CHECK ONE)	<input type="checkbox"/> ADULT BEHAVIORAL HEALTH THERAPEUTIC HOME <input type="checkbox"/> ADULT FOSTER CARE HOME <input type="checkbox"/> ASSISTED LIVING HOME <input type="checkbox"/> CHILD SHELTER <input type="checkbox"/> SOBER LIVING HOME <input type="checkbox"/> OTHER: _____
GROUP HOME ADDRESS			
NUMBER OF CLIENTS OR RESIDENTS	<input type="checkbox"/> 5 OR LESS <input type="checkbox"/> 6 TO 10 (REASONABLE ACCOMMODATION WAIVER REQUIRED PURSUANT TO CITY OF TEMPE ZONING AND DEVELOPMENT CODE <a href="#">SECTION 3-409(D)</a> )		

OPERATOR INFORMATION – REQUIRED					
BUSINESS NAME		ADDRESS			
CONTACT NAME		CITY	STATE	ZIP	
CONTACT EMAIL		PHONE 1	PHONE 2		
Is the residential property subject to any subdivision or property Covenants, Conditions & Restrictions (CC&Rs)?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
By signing below and answering yes above, I acknowledge that I have reviewed any obligated CC&Rs and will be compliant with said regulations or restrictions.					
SIGNATURE OF OWNER OR AUTHORIZED AGENT		X	DATE		
PRINTED NAME OF OWNER OR AUTHORIZED AGENT			TITLE		

FOR CITY USE ONLY – FACILITY IS NOT LOCALLY AUTHORIZED IF THIS SECTION IS INCOMPLETE			
The Community Development Department has received a building permit application for a group home at the address identified above. The Community Development Director, or Designee must sign, date, and return this form to the Building Safety Division to clear the Building Permit for issuance.			
REQUESTED OCCUPANCY TYPE: <input type="checkbox"/> R3 – 5 OR LESS <input type="checkbox"/> R4 – 6 TO 10 (MAX)			
<input type="checkbox"/> BUILDING SAFETY DIVISION – INSPECTIONS (Site Inspection Requested)			
<input type="checkbox"/> PLANNING DIVISION HEREBY ATTESTS THE FOLLOWING:			
<input type="checkbox"/> The proposed group home is <u>approved</u> . The location proposed complies with the <a href="#">City of Tempe Zoning and Development Code Section 3-409(A)</a> . The proposed group home is located on a lot more than one thousand two hundred (1,200) feet, measured by a straight line in any direction, from the lot line of another existing or pending group home.			
<input type="checkbox"/> The proposed group home is <u>denied</u> . The location proposed at this time does not comply with the <a href="#">City of Tempe Zoning and Development Code Section 3-409(A)</a> . The proposed group home is located on a lot within one thousand two hundred (1,200) feet, measured by a straight line in any direction, from the lot line of another existing or pending group home, or exceeds the five (5) resident maximum capacity.			
SIGNATURE OF COMMUNITY DEVELOPMENT DIRECTOR, OR DESIGNEE		X	DATE
PRINTED NAME OF COMMUNITY DEVELOPMENT DIRECTOR, OR DESIGNEE			TITLE