

City of Owosso
APPLICATION TO OPERATE A BED & BREAKFAST
Building Department Review

Owner: _____

Date: _____

Address: _____

Property Tax Roll Number: _____

Phone Number: _____

Requirements:

| Owner – Check all that apply | Building Inspector Review |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| <input type="checkbox"/> Owner must live on the premises – principal residence | |
| <input type="checkbox"/> Operation will be in a single family dwelling unit | |
| <input type="checkbox"/> Bed and breakfast operation is confined to the principal dwelling unit on site | |
| <input type="checkbox"/> There are no separate cooking facilities for the bed and breakfast. Meals are limited to residents and overnight guests | |
| <input type="checkbox"/> 10 or fewer sleeping rooms including sleeping rooms occupied by the owner | |
| <input type="checkbox"/> The bed and breakfast sleeping room(s) occupy no more than a total of 25% of the dwelling unit floor area | |
| <input type="checkbox"/> Sleeping room sizes: <ul style="list-style-type: none"> • 2 persons = 100 square feet • 3 persons = 130 square feet • 4 persons = 160 square feet | |
| <input type="checkbox"/> Smoke and carbon monoxide detectors in each sleeping room | |
| <input type="checkbox"/> Fire extinguishers in proper working order on every floor (usually located in kitchen, mechanical room and a central location of bedrooms) | |
| <input type="checkbox"/> Lavatory and bathing facilities provided | |
| <input type="checkbox"/> Guest register of all persons staying at the bed and breakfast | |
| <input type="checkbox"/> Minimum of two exits | |
| <input type="checkbox"/> Parking – minimum of two plus one for each guest room | |
| <input type="checkbox"/> Signage not to exceed 2 square feet being installed against the flat wall of the principal structure (non-illuminated and unanimated) | |
| <input type="checkbox"/> Planning Commission finding of historic significance | |
| <input type="checkbox"/> The owner shall also meet all other operational terms of the City Code Chapter 7 Bed and Breakfast Operations | |

Floor Plan Attached

\$100 Application Fee Attached

The City reserves the right of denial, suspension or revocation of application for Bed and Breakfast Operations as provided in Chapter 7 of the City Of Owosso Code.

Applicant Signature: _____

Date: _____

Approved

Denied

Building Inspector Signature: _____

Date: _____