



**City of Richmond
Department of Community Development
Zoning Administration**

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Residential or Institutional Uses – Questionnaire

Describe the type of facility that you will be operating.

1. Are you required to/will you obtain a State license for the use?
2. If so, who is the Licensing Authority for the proposed use?
3. Who is your clientele (children, elderly, handicapped/disabled, infirmed, ex-convicts, alcoholics, drug-addicted person, etc.)?
4. What kind of services will be provided at this address? *[Note: Please attach a copy of your proposed business plan or specific program details of operating procedures, program intent and off-site programs related to the proposed use.]*
5. Where do your clients come from and is there/what are eligibility criteria for living, if applicable, at the property?
6. How many occupants will there be at this proposed location.
7. Will there be sleeping, meals, counseling, training or other on-site programs provided at this address?
8. Will there be on-site staff (nurses, security, etc.) to care for/monitor occupants?
9. What are the hours of operation & the method of supervision?
10. Is there a prerequisite for continued involvement with the program?
11. What are the sources of funding for your proposed program?
12. Is your facility available to the general public?