



ARLINGTON COUNTY, VIRGINIA
 DEPARTMENT OF COMMUNITY PLANNING, HOUSING AND DEVELOPMENT
 ZONING ADMINISTRATION
 2100 CLARENDON BOULEVARD SUITE #1000
 ARLINGTON, VIRGINIA 22201
 (703) 228-3883 FAX (703) 228-3896
 WWW.ARLINGTONVA.US

Norma Cozart, Acting Zoning Administrator:

This is to notify the Zoning Administrator of our intention to install an **additional sink** on the premises located at _____ in Arlington County, VA. This fixture will be located in the _____ of the dwelling unit and will be used for the following purpose:

I understand and acknowledge that zoning review of this request does not constitute authorization to use the subject space as a separate dwelling unit. By my signature below I hereby certify that the sink to be installed will not be used as part of an additional kitchen or another dwelling unit. I also agree that if the house is sold, I will notify the new owner of this certification.

 Owner's Signature

 Date

 Owner's Printed Name

 Phone Number

 Owner's Address

Date Received: _____	Initials: _____	Building Permit #: _____
Fee: \$31.90	Receipt # _____	Reviewed: _____ Date: _____

Please enclose 2 copies of the floor plan of the entire floor the sink is located on showing location of secondary sink, full elevation views of sink & cabinet area, & specification sheets for all appliances & the sink.