

**REPORT OF THE
DEPARTMENT OF MENTAL HEALTH, MENTAL RETARDATION
AND SUBSTANCE ABUSE SERVICES**

**The Extent To Which Local Zoning
Ordinances In Virginia
Accommodate Innovative Housing
Initiatives For The Benefit Of
Virginians With Mental Illness**

**TO THE GOVERNOR AND
THE GENERAL ASSEMBLY OF VIRGINIA**



HOUSE DOCUMENT NO. 38

**COMMONWEALTH OF VIRGINIA
RICHMOND
2007**



COMMONWEALTH of VIRGINIA

DEPARTMENT OF
MENTAL HEALTH, MENTAL RETARDATION AND SUBSTANCE ABUSE SERVICES

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September 1, 2007

The Honorable John H. Chichester
P.O. Box 904
Fredericksburg, Virginia 22404-0904

Dear Senator Chichester:

Pursuant to 2006 Virginia Acts of Assembly, Chapter 3, Item 311 V., I am pleased to submit this study report, "*The Extent To Which Local Zoning Ordinances In Virginia Accommodate Innovative Housing Initiatives For The Benefit Of Virginians With Mental Illness.*" Our vision is of a consumer-driven system of services and supports that promotes self-determination, empowerment, recovery, resilience, health, and the highest possible level of consumer participation in all aspects of community life including work, school, family and other meaningful relationships. One of the foundations of this vision is that State and local governments will work with public and private providers to make services available in settings that are the most appropriate to the needs of our individual consumers. This includes housing models that are more integrated into the community than nursing homes, assisted living facilities, and group homes. I hope you will find this paper helpful in understanding some of the zoning issues that present challenges to us in achieving this part of our vision.

Sincerely,

A handwritten signature in black ink that reads "James Reinhard".

James S. Reinhard, M.D.

Cc: Joe Flores, Senate Finance Committee
Ray Ratke
Frank Tetrick
James Martinez
Michael Shank
Ruth Ann Walker



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September 1, 2007

The Honorable Vincent F. Callahan, Jr.
P.O. Box 1173
McLean, Virginia 22101

Dear Delegate Callahan:

Pursuant to 2006 Virginia Acts of Assembly, Chapter 3, Item 311 V., I am pleased to submit this study report, *"The Extent To Which Local Zoning Ordinances In Virginia Accommodate Innovative Housing Initiatives For The Benefit Of Virginians With Mental Illness."* Our vision is of a consumer-driven system of services and supports that promotes self-determination, empowerment, recovery, resilience, health, and the highest possible level of consumer participation in all aspects of community life including work, school, family and other meaningful relationships. One of the foundations of this vision is that State and local governments will work with public and private providers to make services available in settings that are the most appropriate to the needs of our individual consumers. This includes housing models that are more integrated into the community than nursing homes, assisted living facilities, and group homes. I hope you will find this paper helpful in understanding some of the zoning issues that present challenges to us in achieving this part of our vision.

Sincerely,

A handwritten signature in cursive script that reads "James Reinhard".

James S. Reinhard, M.D.

Cc: Susan Massart, House Appropriations Committee
Ray Ratke
Frank Tetrick
James Martinez
Michael Shank
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September 1, 2007

The Honorable Phillip A. Hamilton
P.O. Box 1585
Newport News, Virginia 23601

Dear Delegate Hamilton:

Pursuant to 2006 Virginia Acts of Assembly, Chapter 3, Item 311 V., I am pleased to submit this study report, *"The Extent To Which Local Zoning Ordinances In Virginia Accommodate Innovative Housing Initiatives For The Benefit Of Virginians With Mental Illness."* Our vision is of a consumer-driven system of services and supports that promotes self-determination, empowerment, recovery, resilience, health, and the highest possible level of consumer participation in all aspects of community life including work, school, family and other meaningful relationships. One of the foundations of this vision is that State and local governments will work with public and private providers to make services available in settings that are the most appropriate to the needs of our individual consumers. This includes housing models that are more integrated into the community than nursing homes, assisted living facilities, and group homes. I hope you will find this paper helpful in understanding some of the zoning issues that present challenges to us in achieving this part of our vision.

Sincerely,

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James S. Reinhard, M.D.

Cc: Kim Snead, Joint Commission on Health Care
Ray Ratke
Frank Tetric
James Martinez
Michael Shank
Ruth Ann Walker

The Extent To Which Local Zoning Ordinances In
Virginia Accommodate Innovative Housing Initiatives
For The Benefit Of Virginians With Mental Illness

To the Governor and Chairmen of the House
Appropriations and Senate Finance Committees of the
General Assembly and the Joint Commission on Health
Care

Presented By
James S. Reinhard, M.D.
Commissioner

Virginia Department of Mental Health, Mental
Retardation and Substance Abuse Services

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The Extent To Which Local Zoning Ordinances In Virginia Accommodate Innovative Housing Initiatives For The Benefit Of Virginians With Mental Illness

EXECUTIVE SUMMARY

STUDY LANGUAGE

This paper is in response to the 2006 Virginia Acts Of Assembly, Chapter 3, Item 311 V:

“The Department of Mental Health, Mental Retardation, and Substance Abuse Services, with the assistance of the Department of Housing and Community Development, shall report on the extent to which local zoning ordinances in Virginia accommodate innovative housing initiatives for the benefit of Virginians with mental illness, such as Single Room Occupancy residential units, and shall investigate the availability of state or federal funds for such initiatives. The report shall also examine the feasibility of developing a model Virginia zoning ordinance that permits Single Room Occupancy residential units for persons with mental illness. The department shall report its findings to the Chairmen of the House Appropriation and Senate Finance Committees and the Joint Commission on Health Care by September 1, 2007”

MAJOR FINDINGS

- The Americans with Disabilities Act (ADA) and the Virginia and Federal fair housing laws mandate accommodations for housing models that are more integrated into the community than nursing homes, assisted living facilities, and group homes.
- Supportive housing is a successful, cost-effective and innovative combination of affordable housing with services that helps people with mental illness live more stable, productive lives.
- There are a number of preferred housing models for supportive housing including Single Room Occupancy (SRO) residences.
- Permanent supportive SRO housing has been credited with playing a key role in achieving recently reported reductions in urban homelessness, but Virginia’s plan to end homelessness has faltered, in part, due a lack of clear zoning allowances for SROs.
- Review 97 Virginia localities’ ordinances found that only the Zoning Ordinance of the City of Virginia Beach defines SRO housing.
- Virginia Beach’s ordinance and many other localities’ ordinances from around the country describe a variety of SRO models; providing examples for other Virginia’s localities to follow in order to accommodate this type of housing for low-income single individuals, including those with mental illness. Fairfax, Virginia is also in the process of amending its local zoning ordinances to include SROs.
- The primary sources for supportive housing funds are through HUD homeless assistance grants and the Federal Low-Income Housing Tax Credit Program.
- Other sources include the cost-offsets of providing Supportive Housing to individuals who would otherwise require frequent expensive hospital-based care.

RECOMENDATIONS

- There is no one model zoning ordinance for Single Room Occupancy units that would be appropriate for all Virginia localities, however the following recommendations are offered to permit and encourage their development:
 1. Supportive Housing models, such as SRO housing, should be defined in local comprehensive plans in addition to nursing homes and assisted living facilities as affordable housing for low-income single residents with disabilities pursuant to § 15.2-2223 of the Code of Virginia.
 2. Streamlined review and approval processes for special use permits should be provided for in affordable dwelling unit ordinances to encourage development of Supportive Housing models, such as SROs.
 3. Single Room Occupancy housing should be defined as affordable dwelling units in local zoning ordinances pursuant to § 15.2-2304 and § 15.2-2305 of the Code of Virginia.
 4. The General Assembly should consider amending § 15.2-2304 of the Code of Virginia to make it apply to additional high population-density localities in Virginia, such as those with over 300 persons per square mile.
 5. Virginia should develop a statewide housing plan that includes Supportive Housing to meet the needs of Virginian's with mental illness and encourages VHDA to provide additional incentives for SROs in its Low-Income Housing Tax Credit program and other housing development programs pursuant to § 36-55.33:1(D)(2)(e) and § 36-55.33:2 of the Code of Virginia.
 6. The Department of Social Services should more broadly interpret § 63.2-800 of the Code of Virginia to allow for auxiliary grants to be provided to eligible individuals with disabilities who prefer to live in Supportive Housing units, as opposed to assisted living facilities or adult foster care homes, to help offset the operating costs of such housing.
 7. Community Services Boards and Behavioral Health Authorities should develop joint written agreements with State and local housing agencies pursuant to § 37.2-504 and § 37.2-605 to provide for the appropriate individualized services required by residents of Supportive Housing programs within their jurisdiction.

BACKGROUND: HOUSING FOR VIRGINIANS WITH MENTAL ILLNESS

ASSISTED LIVING FACILITIES

Since the 1970s, Virginia has supported Assisted Living Facilities (ALFs) to serve as the primary community housing option for individuals with mental illness. ALFs are defined in the Code of Virginia as “*any congregate residential setting that provides or coordinates personal and health care services, 24-hour supervision, and assistance (scheduled and unscheduled) for the maintenance or care of four or more adults who are aged, infirm or disabled ...*”¹ ALFs were previously called Adult Care Facilities (ACRs) and are generically known as board and care facilities. Today, approximately 6,700² ALF beds are for adults (an estimated 65% of whom have a mental health diagnosis³) who are funded by state and locally funded Auxiliary Grants (AGs).

GROUP HOMES

In 1990, Virginia enacted Section 15.2-2291 of the Code of Virginia to promote the accommodation of group homes licensed by the Department of Mental Health, Mental Retardation and Substance Abuse Services as an alternative to ALFs for individuals with mental disabilities:

“ Zoning ordinances for all purposes shall consider a residential facility in which no more than eight mentally ill, mentally retarded, or developmentally disabled persons reside, with one or more resident counselors or other staff persons, as residential occupancy by a single family.”

This law has facilitated the creation of numerous group homes and supervised apartments that currently serve over 2,500 mental health consumers⁴, however, Virginia’s reliance on group homes and assisted living facilities (ALFs) as community residential placements for individuals with mental illness has been criticized as an example of the state’s toward institutional responses to meeting the needs of persons with mental disabilities. The 1990 Americans with Disabilities Act (ADA), the HUD fair housing accessibility guidelines, and the Virginia and Federal fair housing laws mandate accommodations for individuals with disabilities to live in more integrated settings in the community.

THE ADA’S COMMUNITY INTEGRATION MANDATE

The Supreme Court’s 1999 Olmstead ruling is an interpretation of state and local governments’ responsibility under the ADA to avoid the “unjustified isolation” of persons with disabilities and to provide services in settings that enable “individuals with disabilities to interact with non-disabled persons to the fullest extent possible.” The Court determined that persons with mental disabilities are unlawfully discriminated against when they “must, because of those disabilities,

¹ § 63.2-100, Code of Virginia

² “*Final Report; Impact of Assisted Living Facility Regulations*”, Joint Legislative and Audit Review Commission, July 2007

³ “*Status Report, Impact of Assisted Living Regulations*”, Joint Legislative and Audit Review Commission, June 2006. JLARC found that almost one-third (2,162) of all AG-funded ALF beds are found in just five localities (Richmond City 931, Washington County 424, Roanoke County 291, Chesapeake 278, and Lynchburg 238) and, conversely, no auxiliary grant beds are found in 41 other localities in Virginia.

⁴ Source – DMHMRSAS Fiscal Year 2006 CSB reports

relinquish participation in community life they could [otherwise] enjoy given reasonable accommodations...”⁵

The U.S. Department of Justice enforces the rights of individuals with mental illness under the community integration provisions of the ADA, including local zoning and land-use decisions. *“Especially where a disability is based on a mental disorder or mental illness, negative stereotypes and unfounded fears can be formidable obstacles to achieving the type of integration and participation envisioned by the ADA...Prohibiting discrimination in zoning and commercial leasing is at the heart of the ADA. The Department will continue to enforce the ADA vigorously with respect to zoning and commercial leasing practices to ensure that persons with disabilities and organizations providing services to such individuals enjoy the full and equal opportunities protected by the Act.”*⁶

The ADA prohibits governments from using standards, criteria, or administrative methods that have a disparate impact upon people with mental or other disabilities and, to avoid discrimination, local zoning ordinances must contain provisions that a zoning board make reasonable accommodation and establish clear criteria for implementing such accommodations for disabled citizens.⁷

BOARD AND CARE HOMES ARE NOT CONSISTENT WITH THE ADA

A recent report issued by the Substance Abuse and Mental Health Services Administration concluded that *“board and care homes serving people with psychiatric disabilities—as currently configured—are generally not consistent with the ADA and the Olmstead mandate, [and] overreliance on such homes undermines recovery, community integration and the transformation of the public mental health system called for by the President’s New Freedom Commission on Mental Health... We believe that state and federal government should take urgent action to ensure that public funds are no longer expended to support segregating living arrangements such as board and care homes.”*⁸ The ADA, the Fair Housing Amendments Act and the Supreme Court’s Olmstead decision are mandates to state and local governments to provide for accommodations⁹ in local zoning ordinances related to the methods of development and models of housing, other than group homes, that are more integrated than assisted living facilities.

INNOVATIVE SUPPORTIVE HOUSING INITIATIVES

Since Virginia’s promotion of ALFs and group homes throughout the 1990s, other more innovative housing models preferred by mental health consumers have been developed, such as Supportive Housing. Supportive housing is a successful, cost-effective and innovative combination of affordable housing with services that help people with mental illness live more

⁵ *Olmstead v. L. C.* (98-536) 527 U.S. 581 (1999) 138 F.3d 893

⁶ *“Access for All: Five Years of Progress, A Report from the Department of Justice on Enforcement of the Americans with Disabilities Act”*, U.S. Department of Justice, Civil Rights Division, 2006

⁷ *“Avoiding Discriminatory Zoning Practices”*, Butler, S., Local Government Insurance Trust, Winter 2002

⁸ *Transforming Housing for People With Psychiatric Disabilities Report*. HHS Pub. No. 4173. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, 2006.

⁹ The Fair Housing Act (42 U.S.C. § 3604(f)(3)(B); 24 C.F.R. § 100.204).requires housing providers, local zoning authorities and others to make reasonable changes or “accommodations” in rules, policies, practices or services.

stable, integrated and productive lives. As defined by the Corporation for Supported Housing, a supportive housing unit is:

- Available to, and intended for a person who is homeless or at risk of homelessness and experiencing mental illness, and often times with other chronic health conditions including substance use issues, and/or multiple barriers to employment and housing stability;
- Where the individual tenant pays no more than 30%-50% of household income towards rent, and ideally no more than 30%;
- Where the tenant has access to a flexible array of comprehensive services, including medical and wellness, mental health, substance use management and recovery, vocational and employment, money management, coordinated support such as case management, life skills training and assistance, household establishment, and tenant advocacy;
- Where use of services or programs is not a condition of ongoing tenancy;
- Where the tenant has a lease or similar form of occupancy agreement and there are not limits on a person's length of tenancy as long as they abide by the conditions of the lease or agreement; and
- Where there is a working partnership that includes ongoing communication between supportive services providers, property owners or managers, and/or housing subsidy programs.

SUPPORTIVE HOUSING MODELS

There are a number of preferred housing models for supportive housing. Most will not require local zoning action unless the locality deems the attendant services as a "special use". The supportive housing setting will vary based on a range of factors including the tenant's preference, the type of housing stock available and the funding available for the development. These models include:

- Rent-subsidized apartments leased in the open market;
- Long-term set asides of units within privately owned buildings;
- Apartment or SRO buildings, or townhouses that mix special-needs housing with general affordable housing;
- Apartment or single-room occupancy (SRO) buildings, townhouses, or single-family homes that exclusively house formerly homeless individuals and/or families.

THE SINGLE ROOM OCCUPANCY (SRO) MODEL

Single Room (or Single Resident) Occupancy (SRO) housing are affordable efficiency housing units that have been defined as "*very small and thereby lower-cost apartment[s] situated within close proximity of public services, designed to serve single adults, with density and parking requirements reasonably commensurate with actual needs.*"¹⁰ Because of the SRO's unique characteristics, including the smaller unit size, higher density, and generally lower demand for parking, most local zoning ordinances are not currently equipped to address a new SRO development. Adding appropriate definitions and related provisions to local zoning ordinances could facilitate part of the needed response to the affordable housing challenges posed by

¹⁰ Quoted from a Fairfax County developer in "*An Affordable Housing Solution for Low Income Single Residents; Single Resident Occupancy (SRO) Housing in Fairfax County, Virginia*", Fairfax County SRO Task Force, 2005

Olmstead and the ADA. Well-planned SRO units should be distinguished from the old residential hotels that still provide for its negative public image. It was the loss of these older residential hotel SRO units in many urban areas, however, that contributed to the explosive increase in homelessness, including homelessness among persons with mental disabilities, during the 1970s and 1980s.¹¹

SROs HELP REDUCE HOMELESSNESS AND HIGH-COST HOSPITALIZATIONS

In addition to the social isolation individuals with mental illness suffer in institutions, many also experience lengthy or repeated episodes of homelessness punctuated by emergency hospital readmissions. Studies in Virginia have found a significant overlap between the homeless population and those with frequent local hospital use. A DMHMRSAS review of data from the greater Richmond area, for example, found that the odds were 6:1 that individuals with three or more inpatient admissions annually would also be found in the local homeless services database. Inpatient care for mental health and co-occurring medical problems for such individuals cost between \$13,000 and \$26,000 in the year they became homeless. Virginia's plan to end homelessness ("*A Common Wealth to End Homelessness*")¹² included using cost-offsets from reduced hospital use to replicate San Francisco's health-based "Direct Access to Housing" program in the greater-Richmond area. SRO housing with on-site supports and individualized services was planned for homeless residents who would otherwise be hospitalized, but the project faltered due to a lack of clear accommodations for SROs in local zoning. Such permanent supportive SRO housing, however, has been credited in Virginia and other states with playing a key role in achieving recently reported reductions in this cycle of homelessness and hospitalizations. The United States Interagency Council on Homelessness¹³ noted last year that geographically and demographically diverse cities are seeing substantial reductions in their "chronically homeless"¹⁴ populations:

- In Portland, Oregon, the street homeless numbers are down 20%, with 600 people experiencing chronic homelessness having been placed into permanent housing.
*"The number of SRO units or other permanent housing targeted to homeless people in the city increased in 2005 by 15% to a total of 2,251."*¹⁵
- In San Francisco, there was a reported 28% decrease in homelessness.
*"Permanent supportive housing has been proven to be the most effective and efficient ways to take the chronically homeless off the streets...Statistics show that the care of one chronically homeless person using Emergency Room services, and/or incarceration, cost San Francisco an average of \$61,000 each year. On the other hand, permanent supportive housing, including treatment and care, would cost \$16,000 a year. The \$16,000 in permanent supportive housing would house the person, as opposed to the \$61,000 in care and services that leaves the person living on the streets."*¹⁶

¹¹ National Coalition for the Homeless, "America's Housing Crisis", <http://www.nationalhomeless.org/housingcrisis.html>

¹² See www.endhomelessnessva.org

¹³ See www.usich.gov

¹⁴ A "chronically homeless" person is defined by the U.S. Department of Housing and Urban Development (HUD) as "an unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more, or has had at least four episodes of homelessness in the past three years."

¹⁵ Portland, Oregon's "*U. S. Conference of Mayors Hunger and Homelessness Information Report*". 2005

¹⁶ "*The San Francisco Plan to Abolish Homelessness*" San Francisco, California, 2004

- In Raleigh/Durham, North Carolina, the number of homeless is down 15%.
*“The cost of one day at Dorothea Dix Hospital is \$594.00, while supportive housing (housing plus services) costs only \$33.43 per day for a person with mental illness.”*¹⁷
- *“Among cities that have seen their street population drop by one-third or more are St. Louis; San Francisco; Portland, Ore.; Nashua, N.H.; and Quincy, Mass. In Philadelphia, the number dropped by one-quarter. In New York City, there was a 35 percent decrease in Manhattan, but increases in the city's other boroughs. Norfolk, Virginia's second-largest city, cut the number of people sleeping on the street by almost half in a single year”.*¹⁸

Virginia’s plan includes support for the development of SROs through State General Fund grants for pre-development and planning provided by the Department of Housing and Community Development (DHCD). The adoption of local zoning ordinances that accommodate such housing in Virginia’s urban communities would greatly help the Commonwealth’s efforts to end homelessness for individuals with serious mental illness.

SPECIAL NEEDS HOUSING IN VIRGINIA’S LOCAL ZONING ORDINANCES

To determine the extent to which local zoning ordinances in Virginia accommodate housing such as SROs, designed to meet the needs of disabled individuals, the web-based search-engine services of Municode.com were utilized.¹⁹ Local ordinances were reviewed for 97 Virginia localities included in the Municode.com database (see list in Appendix A).

Numerous references were found relating to group homes as defined in the Code of Virginia Section 15.2-2291, and examples included the following definition of “family” from Roanoke City’s ordinances and “group home” from Chesterfield’s:

“Family: The term "family" includes:

- (1) One (1) or more persons occupying a single dwelling unit and living and cooking together as a single housekeeping unit, or*
- (2) Up to and including eight (8) mentally ill, mentally retarded, or developmentally disabled persons who reside with one (1) or more resident counselors or other staff persons in a residential facility for which the Department of Mental Health, Mental Retardation, and Substance Abuse Services is the licensing authority pursuant to the Code of Virginia (1950), as amended.”*

“Group home: An adult and/or child caring facility licensed by the State Department Of Mental Health, Mental Retardation And Substance Abuse Services, designed to provide resident services to individuals who are physically handicapped, mentally ill, mentally retarded, or developmentally disabled, in which no more than eight such individuals

¹⁷ *“Ending Homelessness, The Ten Year Action Plan”* Raleigh and Wake County, North Carolina, 2005

¹⁸ *“Homeless Moving Past Shelters: Program to locate apartments growing”* Chicago Tribune, May 13, 2007

¹⁹ This website reports that “Contained on this website are Codes for more than 1,600 local governments in searchable online databases” Retrieved from <http://www.municode.com/about%20us/> July 26, 2006

reside with one or more resident counselors or other staff persons. For the purposes of this section, mental illness and developmental disability shall not include illegal use of or addiction to a controlled substance as defined in Code of Virginia, § 54.1-3401. For the purposes of this chapter, a group home shall be considered a single-family dwelling.”

Examples of other housing types designated to meet the housing needs of Virginians with mental illness were found in the following localities’ ordinances:

Charlottesville

Adult assisted living means a residential facility in which aged, infirm or disabled adults reside, and for which the licensing authority is the Virginia Department of Social Services, or for which no state license is required. The term shall not include the home or residence of an individual who cares only for persons related to him by blood or marriage. The term shall also not include any facility licensed by the State Board of Health or the state Department of Mental Health, Mental Retardation and Substance Abuse Services, or any other facility excluded from the definition of "assisted living facility," set forth within Code of Virginia § 63.2-100.

Culpeper

Life care facility means a facility which may include a full range of living arrangements for elderly and/or disabled persons progressing from independent living in single-family units to congregate apartment living where semi-dependent residents share various common facilities and services, to a nursing home facility for dependent residents providing a full range of support services and nursing care.

Fredericksburg

Homeless shelter means a building or facility that provides 24-hour emergency or transitional housing services for temporarily homeless persons and may include the following: emergency food and shelter, housing assistance, employment counseling, budgeting education, parenting skills, life skills, substance abuse counseling and assistance, case management, children's services, transportation assistance, basic medical care, immunization services for school children, after-care informational, and referral and counseling programs

Institutional housing means any building containing sleeping accommodation and health-related care and services for five or more persons. Such lodging shall have at least five room accommodations. The term shall include lodging for the general care of indigents and orphans, halfway houses, juvenile detention facilities, homes for adults, housing for the elderly, and homeless shelters.

Norfolk

Rooming house. A building or group of attached or detached buildings containing in combination three to nine lodging units²⁰ for occupancy for weekly or longer periods, with or without board, as distinguished from hotels and motels in which rentals are generally for daily or weekly periods and occupancy is by transients.

²⁰ (i.e., “Living quarters for a family which do not contain independent kitchen facilities.”)

PERMANENT SUPPORTIVE SROs IN VIRGINIA

All of the housing types listed above generally provide for shared bedrooms and common living areas in congregate supervised settings. They make up the limited range of housing choices upon which many Virginians with mental illness must rely. The only permanent supportive SROs²¹ that currently exist in Virginia are:

1. The Warwick, an 88-unit facility in Newport News, operated by Community Housing Partners, Inc;
2. The New Clay House, a 47-unit SRO facility in Richmond,
3. The South Richmond SRO, a 39-unit facility, and as of January 2007,
4. The Gosnold Apartments, a 60 unit regional SRO in Norfolk for 42 homeless individuals from Norfolk, 12 from Virginia Beach, and 6 from Portsmouth, all operated by Virginia Supportive Housing.

FAIRFAX COUNTY PLANS FOR AFFORDABLE SRO HOUSING

One locality that has made a commitment to further develop SRO housing for its low-income residents is Fairfax, Virginia. The Fairfax-Falls Church Community Services Board created an SRO Task Force which, after significant study and planning, promoted key recommendations adopted by the County that “address zoning changes, identification of county land and reliable funding sources, streamlining the development process, mobilizing community support, and collaboration among public and private sector organizations.”²² The planned housing will be for a mix of populations, "It's a broad spectrum of people we're talking about," [County Board of Supervisors Chairman] Connolly said. "It is the homeless. It is the low-income. It is the service economy workers. It is even the moderate professional classes -- the teachers, the firefighters. The fact that people are desperate to find even a room so that they can live while they work in this community is stark evidence of the lack of affordable housing."²³

ONLY THE CITY OF VIRGINIA BEACH CURRENTLY DEFINES SROs

In the Municode.com database, Virginia Beach was found to be the only locality that defines²⁴ SRO housing in its local code. Virginia Beach just recently amended its zoning ordinances to specify and allow for Single Room Occupancy Housing with conditional use permits in

²¹ Additionally, the Coan Pond Residences for Working Singles in Fairfax, developed by the Fairfax County Redevelopment and Housing Authority provides SRO housing without supports

²² *ibid*, Fairfax County SRO Task Force, 2005

²³ “Neighbors Fault Fairfax On Housing”, Washington Post, July 1, 2007

²⁴ Only one additional reference to single room occupancy was otherwise found in Virginia’s local codes, which describes modified parking requirements for nine special housing types in Newport News (Newport News Code of Ordinances, Sec. 45-3004.3.), including one for an existing SRO, as follows:

“The permit to reduce the number of parking spaces shall be issued by the zoning administrator in the event that the following conditions are met:

(a) No action shall be taken on any application for such a reduction until the applicant shall have paid a filing fee to the City of Newport News in the amount of one hundred dollars (\$100.00) which shall not be refundable. Only the following residential uses may be approved for parking reductions:

...6. Homeless shelter;

7. Congregate housing for children;

8. Single room occupancy dwellings;

9. Housing for older persons, single-family attached.”

Apartment Districts, Office Districts, and Mixed Use Business Districts (See Appendix B). It defines an SRO housing unit as:

“Single room occupancy unit. A living space with a minimum floor area of one hundred fifty (150) square feet and a maximum floor area of four hundred fifty (450) square feet restricted to occupancy by one (1) person identified by the department of human services as having limited permanent housing alternatives and occupying the unit as a primary residence and not as transient or overnight housing or lodging.”²⁵

SRO MODELS ARE INCLUDED IN LOCAL ZONING AROUND THE COUNTRY

Many urbanized localities around the county include SROs in their zoning ordinances. The definitions of SROs from localities of varying size and population density describe a variety of models and are included in Appendix C. A more detailed definition from Cypress California’s Code of Ordinances is provided in Appendix D as an example of one community’s allowance for SRO as “special use” housing when it meets the Code’s clear delineation of structure and operational requirements.

OTHER SRO ACCOMODATIONS IN LOCAL ZONING ORDINANCES

Some localities also accommodate SROs by providing for reduced off-street parking requirements, since most SRO residents are not expected to own cars, and by waiving other conditions more appropriate to larger multi-family type housing models. Charlotte, North Carolina’s Code is an example of one that clearly accommodates SROs in a variety of zoning districts with special conditions appropriate to this model of supportive housing as follow:

“Tenant income restrictions. SRO developments shall be restricted to low and very low-income individuals as defined by the general plan housing element.

Resident manager. Each SRO project containing sixteen (16) or more units shall have a resident manager available on a twenty-four-hour basis.

Monitored entrances. Each SRO project shall locate a single, controlled entrance to the project adjacent to and in full view of the manager's desk.

Laundry facilities. Each SRO project shall provide laundry facilities in a separate room or rooms located in close proximity to the units served. A minimum of one washer and one dryer shall be provided for each ten (10) units or fraction thereof.

Accessible Units. One disabled person accessible unit shall be required for each twenty (20) rooms. The unit shall comply with all applicable disabled person access requirements.

Common Open Space. For SRO developments containing thirty (30) or fewer units, a minimum of four hundred (400) square feet of common open space shall be provided... For SRO developments containing thirty-one (31) or more units, four

²⁵ (Code of the City of Virginia Beach, Ord. No. 2972, 2-27-07)

hundred (400) square feet of common open space shall be provided, with an additional fifteen (15) square feet required per each additional unit over thirty (30)."

SROs ARE UNDEFINED IN THE SPECIAL-USE PROCESSES USED BY MOST VIRGINIA LOCALITIES

SRO zoning ordinances from around the country provide examples that Virginia's localities could follow to accommodate this type of housing for low-income single individuals, including those with mental illness. Otherwise, the absence of recognition for SROs as a distinct housing type in local zoning ordinances forces a special-needs housing provider to seek permits for an undefined special use in each community in which a facility is proposed. (The special-use permits ordinance from Williamsburg is included in Appendix E as an example of a typical permitting process.) This can be a complicated, lengthy, and expensive application process that is likely to fail unless the local government is familiar with and steadfastly supportive of the proposed project (as in the case of Norfolk's support of the Gosnold Apartment project). The uncertainty and delay inherent in the special exception, special use or conditional use²⁶ application process for an undefined housing type effectively stymies supportive housing providers from proposing more of such projects in Virginia. This denies disabled residents the potential opportunities the ADA promised to live in integrated housing in the community.

AVAILABLE STATE AND FEDERAL FUNDING FOR SUPPORTIVE HOUSING

On average in Virginia, a disabled individual living on Supplemental Security Income (SSI) in 2006 would need to spend 116% of his monthly income to rent an efficiency-housing unit (studio apartment). To be affordable, therefore, the cost of Supportive Housing for typical low-income individuals with mental illness must be funded. Such housing can be funded through a variety of sources, but each source will carry with it requirements that define and limit the types of housing and their eligible residents. The primary Federal source for supportive housing funds, for example, is through HUD homeless assistance grants²⁷:

"The Supportive Housing Program is designed to promote the development of supportive housing services. Examples of this include assisting homeless persons in obtaining housing and in learning to live as independently as possible. Funds may be used to provide the following:

- *Transitional housing*
- *Permanent housing; and*
- *Supportive services.*

Funds may be used for the acquisition, rehabilitation, new construction, leasing, and operating costs of structures for use as supportive housing, services, and the costs of

²⁶ Special use permits, special exceptions, and conditional use permits are essentially three terms that describe one thing: A process whereby the local zoning authority considers whether a use listed in one of those categories will be permitted, perhaps subject to specific limitations, within the underlying zoning district.

²⁷ The Continuum of Care Program included in the 2007 HUD SuperNOFA, published in the *Federal Register* on March 13, 2007, incorporated Single Room Occupancy for Homeless Individuals as components of the Shelter Plus Care and Section 8 Moderate Rehabilitation Single Occupancy for Homeless Individuals.

supportive services that are provided to homeless persons. Funds are made available annually through a nationally competitive process."²⁸

Localities (and the State) can also support the development of new Supportive Housing units through HUD Home Program Funds, (*"the purposes of HOME are "to expand the supply of decent, affordable housing for low- and very low-income families . . . to build state and local capacity to carry out affordable housing programs, . . . [and] to provide for coordinated assistance to participants in the development of affordable low-income housing."*), or Community Development Block Grants (CDBG), (*"to provide aid primarily to low- and moderate-income persons... [CDBG funds are] allocated to entitlement communities, which are metropolitan cities with populations over 50,000, and urban counties with a population over 200,000... however, smaller localities can apply to the states for the remaining CDBG funds on a competitive basis through the Small Cities CDBG Program for Non-Entitlement Communities."*)²⁹

The primary Federal funding source for SRO housing is the Section 8 Moderate Rehabilitation Program for Single Room Occupancy Dwelling for Homeless Individuals. Under the SRO Mod Rehab Program, *"HUD enters into Annual Contributions Contracts with public housing agencies (PHAs) in connection with the moderate rehabilitation of residential properties that, when rehabilitation is completed, will contain multiple single room dwelling units. These PHAs make Section 8 rental assistance payments to participating owners (i.e., landlords) on behalf of homeless individuals who rent the rehabilitated dwellings. The rental assistance payments cover the difference between a portion of the tenant's income (normally 30%) and the unit's rent, which must be within the fair market rent (FMR) established by HUD."*³⁰

Although no funds are currently provided for this program, the Mortgage Insurance for Single Room Occupancy (SRO) Projects is described by HUD as one which usually: *"insures mortgage loans for multifamily properties consisting of single-room occupancy (SRO) apartments. There are no Federal rental subsidies involved with this SRO program and SRO projects generally require assistance from local governing bodies or charitable organizations in order to reduce the rents to affordable levels."*³¹

LOW-INCOME HOUSING TAX CREDITS FOR SUPPORTIVE HOUSING

Finally, one of the most significant funding sources for Supportive Housing in recent years is the Federal Low-Income Housing Tax Credit (LIHTC) Program, which in Virginia is administered by the Virginia Housing Development Authority (VHDA). The LIHTC *"was authorized under Section 42 of the Internal Revenue Code of 1986 and encourages the development of affordable rental housing by providing owners with a federal income tax credit. This program has become a*

²⁸ Virginia Housing Directory, accessed at <http://www.vhda.com/Apps/HousingDirectory/Housing.htm>, 7/27/06

²⁹ *ibid*, Virginia Housing Directory, 7/27/06; for Federal FY 2007, 29 Virginia entitlement localities received an allocation of just over \$42.2 million in HUD CDBG funds and 19 entitlement localities or consortia received an allocation of \$18.3 million in HOME funds. The allocation to DHCD for the balance of the state for FY 2007 was \$19.7 million in CDBG funds and just under \$13.5 in HOME funds. See:

<http://www.hud.gov/offices/cpd/about/budget/budget07/states/va.xls>

³⁰ accessed at <http://www.hud.gov/offices/cpd/homeless/programs/sro/index.cfm>, 7/27/06

³¹ accessed at <http://www.hud.gov/offices/hsg/mfh/progdsc/sro221d3n4.cfm>, 7/27/06

potent incentive for prompting private investors to participate with non-profit and for-profit organizations in the construction and rehabilitation of affordable housing."³²

The Corporation for Supported Housing's publication entitled "Using the Housing Credit for Supportive Housing," outlines how States have created incentives for the development of Supportive Housing, as the following excerpts describe:

- *California includes a homeless-assistance apportionment. In each reservation cycle, 50 percent of the nonprofit set-aside shall be made available to developments assisted under the Shelter Plus Care, Single Room Occupancy Dwellings, or Housing Opportunities for Persons with AIDS programs. In addition, the state has a special needs/SRO set-aside equal to 2 percent of the credit ceiling for any calendar year.*
- *Illinois includes a \$2 million set-aside for developments serving persons with special needs. To qualify, developments must reserve at least 50 percent of total units for special needs tenants and must include financing commitment(s) for tenant services.*
- *Maine includes a \$400,000 set-aside for SRO housing and housing for the homeless. To qualify, developments must submit a service plan for the tenants and a commitment by qualified service provider(s) to provide the services.*
- *Michigan awards points to experienced organizations that commit 10 percent or more of a development's units to serving people with special needs who receive substantial support services. Special needs units are intended to serve tenants with incomes at or below 30 percent of median income.*
- *Georgia awards points to special needs developments including housing for the homeless, people with disabilities (mental, developmental), abused spouses and their children, people with alcohol or other drug addiction, and people living with HIV/AIDS. To receive points, at least 30 percent of total units must be restricted to special needs households and the project must provide at least three supportive services designed to meet the needs of the targeted population.*
- *North Carolina requires all projects to target the greater-of five units or 10 percent of total units to people with disabilities or homeless populations. The five-unit minimum does not apply to applications without federal project-based rental assistance. Projects targeting units under this section are not required to provide on-site supportive services or a service coordinator, but project owners must demonstrate a partnership with a local lead agency and submit a targeting plan for review and certification by the N.C. Department of Health and Human Services.*
- *Kentucky awards points to developments with at least 15 percent of units set-aside for use by people with a physical or mental impairment that substantially limits one or more major life activity. This includes populations with severe mental illness, mental retardation, developmental disabilities, alcohol or drug addiction, HIV/AIDS, acquired (traumatic) brain injury, or physical disabilities. Developments must have a service*

³² *ibid*, Virginia Housing Directory, 7/27/06

component package provided by a nonprofit agency and an appropriate tenant referral system.

Its report concludes that most States are “Using a variety of innovative policies designed to ensure credit developments offer supportive services tailored to specific resident populations” Norfolk’s Gosnold Apartments and a similar proposed SRO project in Virginia Beach successfully competed in VHDA’s recent LIHTC award process; however, the Corporation’s report noted that Virginia was one of only six States lacking housing tax credit policies specifically promoting supportive housing. Responsive to disability advocates, VHDA has subsequently expanded from 3% to 6% its low income housing tax credit “Non-competitive Disability Pool” and reduced the minimum required number of units reserved for persons with disabilities from 100% to 50% of the units in the proposed development. This policy change will better encourage mixed-population projects as opposed to traditional group homes and ALFs. Even with access to this funding potentially expanded, however, proposed projects must still have local zoning or special-use permit approval at the time of application, so future SRO proposals are less likely to come from providers in localities other than Norfolk, Virginia Beach, and Fairfax.

OTHER FUNDING STRATEGIES FOR SUPPORTIVE HOUSING

The Corporation for Supported Housing (CSH) also recently published “*Taking Health Care Home: Impact of System Change Efforts at the Two-Year Mark*”³³. This report describes the strategies of seven sites across the country that were involved in an initiative designed to establish integrated systems that finance and deliver housing and services, increase and better coordinate public and private investment in supportive housing, and create a pipeline of supportive housing for homeless, disabled people. The report described the following State and local funding sources for capital development, operating expenses, and supportive services in Supportive Housing Projects:

Capital Development Funding Sources

- Housing Finance Agency Resources
- Housing/Investment Trust Funds
- Housing Tax Levies
- State-Equivalent Low Income Housing Tax Credits
- Redevelopment/Tax Increment Financing
- Private Foundation Funds

Operating Expense Funding Sources

- Housing Tax Levies
- Rental Subsidies
- Mental Health Funds
- State Demonstration Projects

Supportive Services Funding Sources

- Rental Subsidies
- Mental Health Funds

³³ Written by Martha Burt of MRB Consulting and Jacquelyn Anderson of CSH.

- Substance Abuse Funds
- Criminal Justice Funds
- Health Insurance, including Medicaid supplements
- Private Foundation Funds

HEALTH CARE COST OFFSETS TO FUND SUPPORTIVE HOUSING

“By providing people who are chronically homeless or have other special needs with a way out of expensive emergency public services and back into their own homes and communities, supportive housing not only improves the lives of its residents but also generates significant public savings.”³⁴

As noted in the ten-year plans described above, the cost-offsets from providing Supportive Housing to individuals who would otherwise require frequent and expensive hospital-based care have encouraged policy makers to divert health-care resources towards housing with supportive services. For example, the San Francisco’s Direct Access to Housing (DAH) program of SRO housing with supportive services is targeted to “high utilizers” of hospitals:

“As the DAH program is a program of the health department, an important outcome measure is health care utilization before and after placement in the program. Overall, DAH residents used a considerable amount of health care services prior to entering the DAH facility. Each DAH resident averaged 10 visits to outpatient medical services in the year prior to placement in the facility. After placement, there was little change in outpatient visits in part because on-site case managers encourage residents to maintain primary care appointments. On the other hand, emergency department [ED] use was reduced significantly after housing. Approximately three-quarters of the residents went to the ED at least once in the two years prior to entering the DAH facility. In the two years after placement in the DAH facility, less than half of the DAH residents went to the ED. Similarly, approximately one third of the DAH residents were hospitalized for medical conditions in the two years prior to placement and less than one-quarter were hospitalized in the two years after placement.”³⁵

Individuals with psychiatric and other serious medical problems, if appropriately prioritized for Supportive Housing, could help offset high-cost services in local hospital care. The previously mentioned study by the Department of Mental Health, Mental Retardation and Substance Abuse Services identified potential resources for Supportive Housing by offsetting the cost of inpatient psychiatric services for homeless adults in the greater-Richmond area:

“Data on 2,948 adults who sought homeless services during 2003 and 2004 were merged with data on the utilization in 2002 through 2004 of local hospital psychiatric inpatient care. 541 (18%) of these adults were found to have a total of 2,190 psychiatric admissions during this period at an estimated cost in excess of \$8 million (and over \$3.5 million in 2004 alone). On average, roughly \$9,000 is spent for each of these homeless adults to spend 15 days per year in psychiatric units of local hospitals. For a subset (29%) that have three or more admissions in a year’s time, that average cost rises to \$21,000. A

³⁴ “Using the Housing Credit for Supportive Housing”, Corporation for Supported Housing, 2006

³⁵ National Alliance to End Homelessness, accessed at <http://www.endhomelessness.org/best/directaccess.htm>, July 27, 2006

supportive housing model designed for these individuals is described as an alternative to this costly “revolving door” system of care.”³⁶

A MODEL VIRGINIA ZONING ORDINANCE FOR SRO RESIDENTIAL UNITS

SROs can be appropriate for a variety of neighborhoods, including multifamily, commercial, and mixed-use districts, depending upon the design of the facility and the surrounding amenities. No one model zoning ordinance for Single Room Occupancy units would be appropriate for all Virginia localities, however Appendix B provides a variety of definitions from around the country that could serve as models for consideration by higher-density communities. In addition, the Virginia General Assembly may want to consider the following recommendations to promote SRO housing.

RECOMMENDATIONS

In order to encourage the expansion of supportive housing for Virginians with mental illness, particularly those who would otherwise become or remain institutionalized or homeless, applicable requirements and allowances in the Code of Virginia could be interpreted in ways that encourage SRO development in higher-density communities (see Appendix D), as follows:

- **Supportive Housing models, such as SRO housing, should be defined in local comprehensive plans in addition to nursing homes and assisted living facilities for low-income single residents with disabilities pursuant to § 15.2-2223 of the Code of Virginia.**

§ 15.2-2223. Comprehensive plan to be prepared and adopted; scope and purpose.

“The comprehensive plan shall be made with the purpose of guiding and accomplishing a coordinated, adjusted and harmonious development of the territory which will, in accordance with present and probable future needs and resources, best promote the health, safety, morals, order, convenience, prosperity and general welfare of the inhabitants, including the elderly and persons with disabilities...It may include, but need not be limited to... a system of community service facilities such as... public buildings and institutions, hospitals, nursing homes, assisted living facilities, [supportive housing such as SROs for persons with disabilities] ... and the like... The plan shall include: the designation of areas and implementation of measures for the construction, rehabilitation and maintenance of affordable housing, which is sufficient to meet the current and future needs of residents of all levels of income in the locality...”

- **Streamlined review and approval processes for special use permits should be provided for in affordable dwelling unit ordinances to encourage development of Supportive Housing models, such as SROs.**
- **Single Room Occupancy housing should be defined as affordable dwelling units in local zoning ordinances pursuant to § 15.2-2304 and § 15.2-2305 of the Code of Virginia.**

³⁶ “An Analysis of the Homeward HelpNet and Virginia Health Information Datasets”, Shank, M., DMHMRSAS, 2006

- **The General Assembly should consider amending § 15.2-2304 of the Code of Virginia to make it apply to additional high population-density localities in Virginia, such as those with over 300 persons per square mile.**

§ 15.2-2304. Affordable dwelling unit ordinances in certain localities.

“In furtherance of the purpose of providing affordable shelter for all residents of the Commonwealth, the governing bodies of any [locality with a population density greater than 300 persons per square mile or any] county where the urban county executive form of government or the county manager plan of government is in effect, the Counties of Albemarle and Loudoun, and the City of Alexandria may by amendment to the zoning ordinances of such localities provide for an affordable housing³⁷ dwelling unit program... by providing for optional increases in density in order to reduce land costs...”

§ 15.2-2305. Affordable dwelling unit ordinances.

A. In furtherance of the purpose of providing affordable shelter for all residents of the Commonwealth, the governing body of any locality, other than localities to which § 15.2-2304 applies, may by amendment to the zoning ordinances of such locality provide for an affordable housing dwelling unit program. Such program shall address housing needs, promote a full range of housing choices [including supportive housing for persons with disabilities,] and encourage the construction and continued existence of housing affordable to low and moderate income citizens, determined in accordance with the locality's definition of affordable housing, by providing for increases in density to the applicant in exchange for the applicant providing such affordable housing.”

- **Virginia should develop a statewide housing plan that includes Supportive Housing to meet the needs of Virginian’s with mental illness and encourages VHDA to provide incentives for SROs in its Low-Income Housing Tax Credit and other housing development programs pursuant to § 36-55.33:1 and § 36-55.33:2 of the Code of Virginia.**

§ 36-55.33:1. Mortgage loan terms and conditions

D. Mortgage loans made by [the Virginia Housing Development Authority (HDA)] to housing sponsors or persons or families of low or moderate income to finance the construction, rehabilitation, preservation or improvement of housing developments ... shall be subject to the following terms and conditions ...

2. In considering any application for such an HDA mortgage loan, HDA shall give first priority to applications relating to housing developments or residential housing

³⁷ § 15.2-2201 defines affordable housing as “housing that is affordable to households with incomes at or below the area median income, provided that the occupant pays no more than thirty percent of his gross income for gross housing costs, including utilities. For the purpose of administering affordable dwelling unit ordinances authorized by this chapter, local governments may establish individual definitions of affordable housing and affordable dwelling units including determination of the appropriate percent of area median income and percent of gross income.”

which are or will be well-planned and well-designed, and also shall give consideration to:

- a. The comparative need for housing for persons and families of low and moderate income in the area proposed to be served by the housing development or residential housing; [and]*
- e. The existence of statewide housing plans.*

§ 36-55.33:2. Powers relative to acquisition, development and ownership by [Virginia Housing Development Authority (HAD)] of multi-family residential housing.

“A. HDA shall have all the powers necessary or convenient to purchase, acquire, construct, rehabilitate, ...multi-family residential housing ...for occupancy by persons and families of low and moderate income... HDA shall not exercise the powers granted under this section with respect to any multi-family residential housing development, unless HDA makes the following findings...

- 1. That there exists a shortage of decent, safe and sanitary housing at rentals or prices which persons and families of low income or moderate income can afford within the general housing market area to be served by the proposed housing development.*
- 2. That private enterprise and investment have been unable, without assistance, to provide the needed decent, safe and sanitary housing at rentals or prices which persons or families of low and moderate income can afford.*
- 3. That private sponsors would not be willing, without assistance, to undertake the proposed housing development upon substantially similar terms and conditions.”*

- **The Department of Social Services should more broadly interpret § 63.2-800 of the Code of Virginia to allow for auxiliary grants to be provided to eligible individuals with disabilities who prefer to live in Supportive Housing units, as opposed to assisted living facilities or adult foster care homes, to help offset the operating costs of such housing.**

§ 63.2-100. Definitions.

"Auxiliary grants" means cash payments made to certain aged, blind or disabled individuals who receive benefits under Title XVI of the Social Security Act, as amended, or would be eligible to receive these benefits except for excess income."

§ 63.2-800. Auxiliary grants program; administration of program.

“B. Those individuals who receive an auxiliary grant and who reside in licensed assisted living facilities or adult foster care homes [emphasis added] shall be entitled to a personal needs allowance when computing the amount of the auxiliary grant. The amount of such personal needs allowance shall be set forth in the appropriation act.

C. The Board shall adopt regulations for the administration of the auxiliary grants program that shall include requirements for the Department to use in establishing auxiliary grant rates for licensed assisted living facilities and adult foster care homes...

- **Community Services Boards and Behavioral Health Authorities should develop joint written agreements with State and local housing agencies pursuant to § 37.2-504 and § 37.2-605 to provide for the appropriate individualized services required by residents of Supportive Housing programs within their jurisdiction.**

§ 37.2-504. Community services boards; local government departments; powers and duties.

“A. Every operating and administrative policy community services board and local government department with a policy-advisory board shall have the following powers and duties:

12. Develop joint written agreements, consistent with policies adopted by the Board, with ... housing agencies, where they exist; ... The agreements shall specify the services to be provided to consumers...”

§ 37.2-605. Behavioral health authorities; powers and duties.

“... An authority shall have the following powers and duties:

14. Develop joint written agreements, consistent with policies adopted by the Board, with ... housing agencies, where they exist; ... The agreements shall specify the services to be provided to consumers...”

Appendix A: Local Zoning Ordinances Reviewed for SRO Housing

Name Of Locality	Zoning Codification Reference And Date
Abingdon	Amendment Of Feb. 6, 2006
Accomack	Ordinance Of Nov. 15, 2006
Alexandria	No. 4472, Adopted Jan. 20, 2007
Alexandria	No. 4475, Enacted Feb. 24, 2007
Altavista	Ordinances Of Dec. 12, 2006
Amherst	Ordinances Of April 17, 2007
Arlington	No. 04-22, Adopted Oct. 2, 2004
Ashland	Amendment Of Feb. 21, 2006
Bedford	Ordinance Of April 24, 2006
Berryville	Ordinance Of Dec. 12, 2006
Blacksburg	No. 1420, Enacted July 11, 2006
Blackstone	Ordinances Of Feb. 26, 2007
Bland	Amendment Of Feb. 22, 2005
Bristol	No. 06.15, Enacted Nov. 14, 2006
Brunswick	# 06-025, Oct. 18, 2006
Cape Charles	Adopted October 8, 2002
Charlottesville	Ordinance Of February 20, 2007
Chesapeake	No. 07-O-031, Enacted Feb. 27, 2007.
Chesterfield	Ordinance Of Oct. 11, 2006
Culpeper	Ordinance Of June 14, 2005
Cumberland	Ordinances Of Nov. 14, 2006
Damascus	Ordinances Of Aug. 6, 2001
Danville	No. 2007-05.09, Adopted May 15, 2007
Dinwiddie	Ordinance Of Oct. 17, 2006
Dumfries	Ordinances Of July 5, 2005
Emporia	Ordinance Of Nov. 21, 2006
Fairfax City	No. 2006-8, Enacted June 13, 2006
Fairfax County	No. 41-06f, Adopted Dec. 4, 2006
Falls Church	No. 1799, Adopted Dec. 11, 2006
Farmville	No. 112, Enacted Feb. 14, 2007
Fauquier	No. 06-05, Enacted Dec. 14, 2006
Floyd	Ordinances Of Oct. 22, 2002
Franklin	No. 2005-18, Adopted July 11, 2005
Franklin	Ordinance Of March 27, 2007(4)
Fredericksburg	No. 07-05, Adopted Feb. 27, 2007
Glade Spring	Ordinance Of 11-7-05(3)
Gloucester	Ordinance Of Dec. 6, 2006
Goochland	Ordinance Of Feb. 6, 2007
Greene	Ordinance Of May 27, 2003
Greensville	Amendment Of Sept. 18, 2006
Halifax	Ordinance Of December 12, 2005
Hampton	No. 1426, Enacted June 14, 2006
Hanover	No. 06-21 Enacted March 14, 2007
Harrisonburg	Ordinance Of Jan. 23, 2007
Haymarket	Ordinances Of Oct. 2, 2006
Henrico	No. 1086, Enacted May 9, 2006
Henry	Amendments Of July 25, 2006

Herndon	No. 07-O-09, Enacted Feb. 27, 2007
Hopewell	No. 2006-09, Adopted Oct. 24, 2006
King And Queen	Ordinance Of Sept. 11, 2006
King William	Ordinance Of Nov. 20, 2006
Lancaster	Ordinance Of March 21, 2006
Leesburg	No. 2006-O-67, Enacted Nov. 14, 2006
Louisa	Resolution Of April 2, 2007(07.058)
Luray	No. 2007-01-03, Enacted Jan. 8, 2007
Manassas	No. O-2007-02, Adopted Aug. 9, 2006
Manassas Park	No. 06-1700-815, Adopted Sept. 19, 2006
Montgomery	No. Ord-Fy-07-18, Adopted Dec. 18, 2006
Mount Jackson	No. O-21-2006, Enacted Nov. 14, 2006
New Kent	No. O-11-07, Enacted April 23, 2007
New Market	No. 56, Enacted May 15, 2006
Newport News	No. 6143-05, Enacted July 12, 2005
Norfolk	No. 42,556, Adopted Feb. 13, 2007
Norton	Ordinance Of October 17, 2000
Orange	Ordinance Of Dec. 13, 2005
Petersburg	No. 06-55, Adopted June 6, 2006
Poquoson	No. 1253, Enacted June 26, 2006
Portsmouth	No. 2007-35, Adopted March 27, 2007
Powhatan	Ordinance Of May 8, 2006
Prince George	No. O-07-01, Enacted Jan. 9, 2007
Prince William	No. 07-02, Enacted Jan. 23, 2007
Pulaski	No. 2004-18, Enacted July 6, 2004
Purcellville	No. 06-12-01, Adopted Dec. 12, 2006
Radford	No. 1498, Adopted Oct. 12, 2004
Richmond City	No. 2006-174-173, Enacted June 26, 2006
Roanoke	No. 37715, Adopted March 19, 2007
Roanoke County	No. 082206-3, Enacted Aug. 22, 2006
Rockingham	No. 06-04, Enacted April 27, 2006
Rocky Mount	Ordinance Of March 19, 2001
Salem	Ordinance Of Aug. 28, 2006
South Boston	Ordinance Of May 22, 2006
Southampton	Ordinances Of June 26, 2006
Spotsylvania	No. 23-80, Adopted March 27, 2007
Stafford	No. O06-89, Enacted Dec. 5, 2006
Suffolk	No. 06-O-076, Enacted June 21, 2006
Tappahannock	Ordinance Of April 9, 2007
Vinton	No. 830, Enacted Dec. 6, 2005
Virginia Beach	No. 2980, Adopted May 15, 2007
Warrenton	No. 2006-08, Enacted July 11, 2006
Washington	No. 2007-07, Enacted April 10, 2007
Waynesboro	No. 2006-103, Enacted Dec. 11, 2006
West Point	No. 15-03, Adopted Nov. 24, 200
Westmoreland	Ordinance Of June 12, 2006
Williamsburg	No. 07-15, Adopted March 8, 2007
Winchester	No. 037-2005, Enacted December 13, 2005
Wise County	No. 02-2005, Adopted Jan. 13, 2005
Wytheville	No. 1210, Adopted March 12, 2007

Appendix B: VIRGINIA BEACH's ZONING ACCOMODATION FOR SROs

Code of the City of Virginia Beach, Ord. No. 2972, 2-27-07

Sec. 241.1. Single room occupancy facility.

(a) In determining whether to grant a conditional use permit for a single room occupancy facility, the city council shall consider, in addition to the compatibility of the proposed facility with nearby residential and commercial areas and other general criteria:

- (1) The proximity of the proposed facility to mass transit lines and to retail, medical, recreational and other uses necessary to support the residents of the facility;*
- (2) The proposed layout of the site, including open space and landscaping;*
- (3) The architectural design of the proposed facility; and*
- (4) The management plan required by subsection (b) below.*

(b) Single room occupancy facilities shall be subject to the following standards:

- (1) Density. The maximum number of single room occupancy units in the facility shall be established by the city council in the conditional use permit, irrespective of the maximum dwelling unit density permitted in the zoning district in which the facility is located.*
- (2) Parking. There shall be one (1) parking space for each single room occupancy unit, provided that the city council may allow a lesser number if it finds that special conditions warrant such a reduction.*
- (3) Facility management. A single room occupancy facility shall provide on-site management, including a manager who shall reside in a unit within the facility. A management plan for the facility shall be provided as part of the conditional use permit application. Such plan shall address the management and operation of the facility, rental procedures, safety and security of residents and building maintenance.*
- (4) [Bathroom facilities.] Full or partial kitchen and bathroom facilities may be included in each unit or may be shared among units."*

Appendix C: Other Localities and Their SRO Zoning Definitions

Augusta, Maine (population 18,560, density 335.1 per sq. mile)

Single room occupancy (SRO) dwelling unit: A self-contained dwelling unit that provides ambulatory independent living for one resident per unit. Each SRO unit shall be a minimum of 150 sq.ft. in size, and a maximum of 375 sq.ft. for non handicapped accessible units (or 425 sq.ft. for handicapped accessible units). Each unit may provide kitchenettes and private bathroom facilities in each unit, and/or shared common bathrooms and kitchens. Multiple Family Dwellings that incorporate multiple SRO dwelling units may include, but are not required to include, common gathering spaces for residents, program spaces, office space, and common laundry facilities.

Greensboro, North Carolina (population 223,891, density 2,138.3 per sq. mile)

Single room occupancy (SRO) residence. A building containing twenty-five (25) or more rooming units, which are available for rental occupancy for periods of seven (7) days or longer. This term does not include boarding houses, tourist homes, motels, hotels, private dormitories, congregate care facilities, family care homes, and group care facilities.

Charlotte, North Carolina (population 540,828, density 2,232.4 per sq. mile)

Single room occupancy (SRO) residence. A building containing at least eleven (11), but not more than one hundred and twenty (120) rooming units, which are available for rental occupancy for periods of seven (7) days or longer. This does not include boarding houses, motels, hotels, private dormitories, congregate care facilities, nursing homes, family care homes, group homes, emergency shelters, homeless shelters, and accessory shelters.

Peoria, Illinois (population 112,936, density 2,543.4 per sq. mile)

Single Room Occupancy: A residential property that includes multiple single room dwelling units. Each unit is for occupancy by primarily one (1) individual but not more than two (2) individuals. The unit need not, but may contain food preparation or sanitary facilities, or both. Units are not for lease by the general public but for certain qualified individuals. The property may or may not have on or off site supportive services as a condition of residency.

Grand Rapids, Michigan (population 197,800, density 4,431.2 per sq. mile)

Single room occupancy means a room in a building containing not less than fifty (50) one (1) room occupancy units, and which rooms are designed and intended for a single individual's permanent or long-term non-transient accommodation and not for hotel purposes, and which provide sleeping facilities as well as bathroom or kitchen facilities or both bathroom and kitchen facilities. A single room occupancy shall comply with all provisions of this Chapter except:

- (1) The bathroom facilities required by this Chapter, if provided within the single room occupancy unit, need not include a lavatory sink if there is available, within the single room occupancy unit, another sink that may be used for personal hygiene.*

(2) The kitchen appliances requirement set out in this Chapter may be met if the single room occupancy contains a single kitchen appliance which includes a refrigerator and a cooking surface and which is not equipped with an oven.

(3) The floor space requirement of this Chapter may be met by a single room occupancy unit of one hundred twenty (120) square feet which may include the area of any bathroom.

San Francisco, California (population 776,733, density 16,634.4 per sq. mile)

Single Room Occupancy (SRO) Unit. A dwelling unit or group housing room consisting of no more than one occupied room with a maximum gross floor area of 350 square feet and meeting the Housing Code's minimum floor area standards. The unit may have a bathroom in addition to the occupied room. As a dwelling unit, it would have a cooking facility and bathroom. As a group housing room, it would share a kitchen with one or more other single room occupancy unit/s in the same building and may also share a bathroom. A single room occupancy building (or "SRO" building) is one that contains one or more SRO units and nonaccessory living space.

Appendix D: Cypress, California - Code of Ordinances

SECTION 17. STANDARDS FOR SPECIFIC LAND USES

3.17.210. Single-room occupancy housing.

This subsection provides development and operational standards for the establishment of single-room occupancy housing (SRO).

A. Conditional use permit. Single-room occupancy housing shall be allowed by conditional use permit in compliance with subsection 4.19.070 (Conditional use permits) subject to the provisions of the applicable zoning district, and the regulations of this subsection.

1. Preapplication conference. Proposed SRO developments shall be subject to a formal, preliminary design review process before the submittal of a formal application.

2. Management plan. Each SRO project shall submit a management plan to the department as part of the conditional use permit application. This plan shall contain information regarding the development's projected staffing needs, facility management and operations, emergency procedures, security, rental procedures, and proposed rental rates.

3. Revocations and modifications of conditional use permit. The planning agency may revoke or modify the permit in compliance with section 29 (Revocations and Modifications).

B. Management requirements.

1. Resident manager. Each SRO project containing sixteen (16) or more units shall have a resident manager available on a twenty-four-hour basis.

2. Annual report. Each SRO development owner shall file an annual report with the department. This report shall include the range of monthly rents, the monthly income of the residents, occupancy rates, and the number of vehicles owned by the residents.

C. Tenant occupancy and income restrictions.

1. Length of tenancy. Rental units shall be established for weekly and monthly tenancies only. Deposit requirements shall be specified for each type of tenancy.

2. Tenant income restrictions. SRO developments shall be restricted to low and very low-income individuals as defined by the general plan housing element. This restriction shall not apply to an SRO project's twenty-four-hour resident manager.

D. Standards. The commission shall use the following standards and criteria when determining the appropriateness of granting the conditional use permit:

1. *Compliance with codes.* Single-room occupancy housing (SRO) projects shall comply with the most recent city building and housing codes.
2. *Room size requirements.* Individual dwelling units within an SRO development shall have a:
 - a. *[Single occupancy rooms.]* Single occupancy room size of no less than one hundred seventy-five (175) square feet and no greater than two hundred twenty (220) square feet.
 - b. *[Double occupancy rooms.]* Double occupancy room size of no less than two hundred seventy-five (275) square feet and no greater than four hundred fifty (450) square feet.
3. *Allowable percentage of double occupancy rooms.* Double occupancy rooms shall not make up more than ten (10) percent of any SRO project.
4. *Access requirements.*
 - a. *Each development shall comply with federal, state, and local disabled person access requirements.*
 - b. *One disabled person accessible unit shall be required for each twenty (20) rooms. The unit shall comply with all applicable disabled person access requirements.*
5. *Kitchens.* Each SRO unit shall contain a kitchen. Kitchens shall be required to contain a sink with garbage disposal, a countertop (sixteen (16) inches by twenty-four (24) inches minimum), refrigerator, and stove or microwave oven. If stoves are not provided in each unit, then stoves shall be provided in a common kitchen area accessible to the entire SRO project.
6. *Bathrooms.* Each SRO unit shall contain a bathroom. Bathroom shall be required to contain a sink, toilet, and shower or bathtub.
7. *Closets.* Each SRO unit shall contain closet/storage space no less than forty-eight (48) cubic feet in size.
8. *Common open space requirements.*
 - a. *For SRO developments containing thirty (30) or fewer units, a minimum of four hundred (400) square feet of common open space shall be provided.*
 - b. *For SRO developments containing thirty-one (31) or more units, four hundred (400) square feet of common open space shall be provided, with an additional fifteen (15) square feet required per each additional unit over thirty (30).*

9. *Monitored entrances. Each SRO project shall locate a single, controlled entrance to the project adjacent to and in full view of the manager's desk.*
10. *Mailboxes. A mailbox shall be provided for each SRO unit.*
11. *Bicycle parking. Each SRO project shall provide a secured bicycle parking area. This area shall be able to accommodate one bicycle for every three (3) units.*
12. *Storage spaces. Each SRO project shall provide each unit with a lockable storage space not less than ten (10) cubic feet in size within the development.*
13. *Laundry facilities. Each SRO project shall provide laundry facilities in a separate room or rooms located in close proximity to the units served. A minimum of one washer and one dryer shall be provided for each ten (10) units or fraction thereof.*
14. *Utility closets. Each SRO project shall provide a supply storeroom and/or utility closet with at least one laundry tub with hot and cold water on every floor.*
15. *Trash area. Each SRO project shall provide a centralized trash area.*
16. *Setbacks for two-story SROs. Two-story SRO developments located adjacent to property in a residential zoning district shall be required to maintain a minimum building setback of twenty (20) feet from the abutting lot line.*

(Ord. No. 1062, § 2(Exh. A), 11-25-04.)

Appendix E: Williamsburg Zoning Ordinance – Special Use Permits

DIVISION 2. SPECIAL USE PERMITS

Sec. 21-41. Purpose and intent.

Special use permit uses are those which, if not specially regulated, can have an undue impact or be incompatible with other uses of land within or adjacent to a given zoning district. Upon the granting of a special use permit by the city council, these uses may be allowed to locate or expand within designated districts under the standards, controls, limitations, performance criteria, restrictions and other regulations of this division. (Ord. No. 862, 10-10-91)

Sec. 21-42. Review standards for special use permits.

All applications for special use permits shall be reviewed using the following criteria:

(a) The proposed use shall be:

(1) In harmony with the adopted comprehensive plan.

(2) In harmony with the intent and purpose of the zoning district in which the use is proposed to be located.

(3) In harmony with the character of adjacent properties and the surrounding neighborhoods, and with existing and proposed development.

(b) The proposed use shall be adequately served by essential public services such as streets, drainage facilities, fire protection and public water and sewer facilities.

(c) The proposed use shall not result in the destruction, loss or damage of any feature determined to be of significant ecological, scenic or historic importance.

(d) The proposed use shall be designed, sited and landscaped so that the use will not hinder or discourage the appropriate development or use of adjacent properties and surrounding neighborhoods. (Ord. No. 862, 10-10-91)

Sec. 21-43. Special conditions.

(a) In granting any special use permit, the city council may impose any conditions necessary to ensure that the proposed use will conform with the requirements of this section and will continue to do so. The city council may require surety bond or other guarantee of performance acceptable to it to ensure compliance with the conditions imposed.

(b) The city council may impose reasonable standards as deemed necessary to protect the public interest and welfare. Such standards may include, but need not be limited to:

(1) More restrictive sign standards.

(2) Additional open space, landscaping or screening requirements.

- (3) *Additional yard requirements.*
 - (4) *Special lighting requirements.*
 - (5) *Limitation on hours of operation.*
 - (6) *Additional offstreet parking and loading requirements.*
- (c) *The city council may specify time limits or expiration dates for a special use permit, including provisions for periodic review and renewal. (Ord. No. 862, 10-10-91)*

Sec. 21-44. Special use permit application requirements.

(a) *An application for a special use permit shall be made by the owner, contract purchaser with the owner's written consent, or the owner's agent, of the property on which the proposed use is to be located. The application shall be submitted to the zoning administrator, and shall be accompanied by the filing fee listed on the fee schedule adopted by city council.*

(b) *If the request for a special use permit has been denied by the city council, substantially the same request shall not be reconsidered within 365 days of the denial.*

(c) *The application shall include the following information:*

- (1) *A preliminary site plan in accordance with article VII, Site Plans, section 21-778.*
- (2) *A description of the proposed use and, where applicable, the hours of operation and the proposed number of employees.*
- (3) *When deemed necessary by the planning director or the planning commission, the following information shall be provided:*
 - a. *The front, side and rear elevations and floor plans of the proposed buildings.*
 - b. *A traffic impact analysis, showing the effect of traffic generated by this project on surrounding streets and neighborhoods.*
 - c. *A public utility analysis, showing the effect of this project on public water, sewer and/or storm drainage facilities.*
 - d. *A fiscal impact analysis. The planning director or the planning commission may request the city council to provide funds for the preparation of this study by the city. (Ord. No. 862, 10-10-91; Ord. No. 2-94, § 1, 1-13-94; Ord. No. 19-98, 6-11-98)*

Sec. 21-45. Action by planning commission.

(a) *No special use permit shall be approved unless the proposal has been reviewed by the planning commission. The commission shall hold at least one public hearing after*

notice as required by Code of Virginia, § 15.1-431. Following the hearing, the planning commission shall prepare and by motion adopt its recommendations, which may include changes in the original proposal resulting from the hearing, and shall transmit such recommendations, together with any explanatory material, to the city council.

(b) Failure of the planning commission to report within 90 days after the first meeting of the commission after the proposal has been referred to the commission shall be deemed approval, unless the proposed special use permit has been withdrawn by the applicant prior to the expiration of such time period.

(c) In addition to the notices required, there shall be posted upon the affected parcel or parcels, clearly visible from a public street, a sign containing the heading "PUBLIC NOTICE" prominently displayed in bold print. Such sign shall state the special use permit case number and the telephone number of the planning department. Such notice shall be posted at least 14 days prior to the planning commission public hearing. Failure to constantly maintain such sign on the property until the date of the planning commission public hearing shall not invalidate the granting of a special use permit. An affidavit by the zoning administrator or his agent stating that the required sign was properly posted shall be prima facie evidence that the posting requirement was complied with. (Ord. No. 862, 10-10-91)

Sec. 21-46. Action by city council.

(a) Before approving a special use permit, the city council shall hold at least one public hearing after public notice as required by Code of Virginia, § 15.2-2204, after which the city council may make appropriate changes to or impose appropriate conditions upon the proposed special use.

(b) Approval of a special use permit by city council shall expire one year from the date of the approval of the special use permit, unless a final site plan in accordance with the special use permit has been approved in accordance with Article VII. If an applicant for a special use permit presents a specific construction schedule for the project as a part of the application, city council may specify an expiration date for the submittal of the final site plan or plans based on the submitted time schedule; provided that city council concludes that the schedule is necessary based on the nature and scope of the project. If the final site plan has been approved, the special use permit shall expire five years from the date of the approval of the final site plan, unless a building permit has been obtained for construction; or, if a building permit has been issued and construction has not commenced, upon the expiration of the building permit. (Ord. No. 862, 10-10-91; Ord. No. 14-99, 4-8-99; Ord. No. 23-99, 10-14-99)

Sec. 21-47. Minor changes to the approved special use permit.

(a) Minor changes to the approved special use permit may be approved by the planning commission during site plan review. A change shall be minor if it:

(1) Does not change the general character of the approved special use permit.

- (2) Does not adversely affect the development or use of adjacent properties and surrounding neighborhoods.*
 - (3) Does not result in any substantial change to major external access points.*
 - (4) Does not increase the approved number of dwelling units and/or the approved amount of nonresidential floor area.*
 - (5) Does not add buildings not shown on the approved development plan.*
 - (6) Does not violate any specific conditions that were made a part of the special use permit approval.*
- (b) Any changes not authorized by this section shall require amendment of the special use permit in accordance with the procedures contained in this division for a new application.*