

APPLICATION FOR REZONING
COUNTY OF AMELIA
P.O. BOX A
AMELIA, VA 23002
(804)561-3039

FOR OFFICE USE ONLY
Application No. _____
Date Application Filed _____
Date and Time of Hearing _____

Applicant: _____
Address: _____

Phone No.: _____

PROPERTY DESCRIPTION

Location: _____
Owner/Lessee: _____
Tax Map No: Section _____ Lot No. _____ Subdivision _____
Magisterial District [] Leigh [] Jackson [] Giles Public Road Access: _____
No. of Parcels: _____ Acreage: _____ Deed Book/Page: _____ Plat Book: _____
Date Acquired: _____ Zoning District: _____
Are there any deed restrictions? [] Yes [] No, if yes, attach copy of deed restrictions.
Date restrictions expire: _____

NECESSITY OF REQUEST

The applicant requests a change of zoning classification for the above-described property from _____ zone to _____ zone. Describe the proposed use and the reason for the proposed zoning request.

PROFFERS

List proffer(s), if the rezoning request is a conditional rezoning.

REQUIREMENTS AND INSTRUCTIONS FOR FILING APPLICATION FOR REZONING

The following must be filled out completely and submitted by the applicant.

1. The application form must be filled out completely with full answers to every statement and question. The application may be signed by an agent or attorney or by the lessee, owner, or owners in front of a Notary Public in the space provided on Page 4. Additional sheets may be attached, as necessary.
2. Furnish a site plan for any cases involving expansion of an existing structure or construction of a new building. The plan shall consist of the following:
 - a. Plot plan or survey plat showing the dimensions of the property drawn to an appropriate scale.
 - b. Location and dimensions of existing structures, right-of-ways, easements, boundaries, water courses, and bodies of water.
 - c. Location and dimensions of proposed development including structures, types of uses, access drives, setbacks, easements, etc.
 - d. In the case of commercial and industrial developments, sketches and plans for proposed off-street parking and loading areas, signage, outdoor lighting, buffers and screening.

APPLICATION FEE

The application fee required by Section 1-6 of the Amelia County Zoning Ordinance is \$300.00. This fee must be paid at the time of the filing of the application. This fee only partially covers the County's costs for advertising and processing the application through the various stages. Make checks payable to "Treasurer of Amelia County."

PHOTOGRAPHS

Photographs of the property involved (not over 8½ X 11 inches) to illustrate the conditions of the property under consideration are always helpful and are suggested as exhibits to accompany this application.

LEGAL DESCRIPTION

Legal description of the area to be rezoned shall be submitted with the application.

IMPROVEMENTS PROPOSED

Describe briefly the improvements proposed. State whether new buildings are to be constructed, existing buildings are to be used and/or renovated or additions are to be made to existing buildings.

PROTECTION TO ADJOINING PROPERTY

Describe the effects of the proposed use on adjacent property and the surrounding neighborhood. What protection will be offered adjoining property owners?

ENHANCEMENT OF COUNTY

Why does the applicant believe that this requested change will be advantageous to the County?
(Please substantiate with facts)

PLAN

Furnish a plot plan showing boundaries and dimensions of property, width of abutting right-of-ways, location and size of buildings on the site, roadways, walks, off street parking and loading space, landscaping, etc. Architect's sketches showing elevations of proposed buildings and complete plans are desirable.

STATE OF VIRGINIA
COUNTY OF AMELIA

)
) to wit

I, _____, being duly sworn, deposed and say that I am the Lessee/Owner of the property involved in the application. If I am not the Lessee/Owner, I will produce a copy of a contract to purchase the property or right to submit this application. I further declare that I have familiarized myself with respect to preparing and filing the application and that the foregoing statements and answers herein contained and the information on the attached sheets thoroughly and to the best of my ability present the argument on behalf of the applicant herewith requested and that the statements and information above referred to are in all respects true and correct to the best of my knowledge and belief.

Signed _____

Phone Number _____

Subscribed and sworn to before me this _____ Day of _____ 20____

Notary Public

My Commission Expires

ADJACENT PROPERTY OWNER'S LIST

<u>Section/Lot</u>	<u>Owner</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

STATEMENT FOR VALIDITY OF INFORMATION

Every applicant shall sign the following document to substantiate the validity of submitted information.

State of Virginia

County of _____ to wit

I, _____, being duly sworn, depose and say that I am the Lessee/Owner of the property involved in the application. If I am not the Lessee/Owner, I will produce a copy of a contract to purchase the property or I will present written certification contract to purchase the property or I will present written certification from the owner granting me the right to submit this application.

I declare that I have familiarized myself with the rules and regulation pertaining to preparing and filing this application. I further declare that the foregoing statements and answers provided throughout the various sections of this application are in all respects true and correct to the best of my knowledge and belief.

Signed _____

Print Name _____

Subscribed and sworn to before me this _____ day of _____, 200_____.

Notary Public

My Commission Expires

OWNERSHIP DISCLOSURE

Please list below the names and addresses of all owners or parties in interest of the land subject to this request.

NOTE: If this request is in the name of a corporation, artificial person, joint venture, trust, or other form of ownership, all officers, directors, and any stock holders owning ten percent or more of such stock must be listed.

NAME

ADDRESS (Include Zip Code)

I, _____, do hereby swear and affirm that to the best of my knowledge and belief, the above information is true and that I am the applicant for this request for parcel number(s) _____ of tax map number(s) _____ requesting Rezoning, Conditional Use Permit, and Variance/Appeal. **(Please circle one)**

If the above information changes at any time while this case is being considered, I will provide the County with an updated list.

Signature

STATE OF VIRGINIA
COUNTY OF _____

to wit:

This day _____ personally appeared before me, _____, a Notary Public in and for the County and State aforesaid, and swore or affirmed that the matters stated in the foregoing Ownership Disclosure Affidavit are true to the best of his/her knowledge and belief.

Given under my hand this _____ day of _____, 20____.

Notary Public

My commission expires: _____.

LIMITED POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

1. That I/We
(Name) _____ Telephone _____
(Address) _____
(Name) _____ Telephone _____
(Address) _____
(Name) _____ Telephone _____
(Address) _____
(Name) _____ Telephone _____
(Address) _____

being all of the owner(s) of the property described as County tax map numbers:

and authorized to take such action, do hereby make, constitute and appoint:

2. (Name) _____ Telephone _____
(Address) _____

to act as my/our true and lawful attorney-in-fact for and in my/own name, place and stead with full power and authority I/we would have if acting personally to seek rezoning, conditional use, or variance, and to set forth and offer such legally acceptable voluntarily proffered conditions including any additions, amendments, modifications or deletions thereto that in his discretion are deemed reasonable, appropriate and necessary except as follows:

3. _____

4. In witness whereof, I/we have hereto set my/our hand and seal this

____ day of _____ 20____.

Signature(s)

Signature(s)

Signature(s)

Signature(s)

Witnessed by: _____

Witnessed by: _____

NOTE: This document, with original signatures, shall be filed with the application and become a permanent part thereof.

APPLICANT'S PERMISSION FOR INSPECTION OF PROPERTY

I, _____, hereby grant access to the Planning Director, Zoning Administrator, or assigns thereof, to enter my property during reasonable hours without prior notice to make inspections as deemed necessary for the evaluation of my application for _____ (Specify type of request - rezoning, conditional use permit, private road, variance, etc.).

Applicant's Signature

Date

Subscribed and sworn to before me this _____ day of _____, 20_____.

Notary Public's Signature

Commission Expiration Date

STATEMENT OF PROFFER

CASE # _____

Pursuant to Section 15.2-2296 of the Code of Virginia and Article _____ of the _____ County Zoning Ordinance. I do hereby voluntarily proffer, as the owner of record of the property which is the subject of this rezoning request, the following conditions:

I hereby acknowledge that the Rezoning of the Subject Property gives rise to the need for these conditions.

Owner of Record - Signature

Date

Type or print name

COMMONWEALTH OF VIRGINIA,
COUNTY OF _____; to wit:

Sworn and subscribed to before me a Notary Public in and for the jurisdiction aforesaid by _____,
_____, whose name is signed to the above, on this ___ day of ___ 200 ___.

Notary Public

My Commission expires: _____

APPLICANT'S PERMISSION FOR INSPECTION OF PROPERTY

I, _____, hereby grant access to the Planning Director, Zoning Administrator, or assigns thereof, to enter my property during reasonable hours without prior notice to make inspections as deemed necessary for the evaluation of my application for _____ (Specify type of request – rezoning, special exception permit, subdivision application, erosion and sediment control permit, variance, etc.).

Applicant's Signature

Date

Subscribed and sworn to before me this _____ day of _____, 20__.

Notary Public's Signature

Commission Expiration Date

Notary Registration Number