

# CITY OF HAMPTON, VIRGINIA LAND USE APPLICATION

Office Use Only:

Case Number: \_\_\_\_\_

Date Received: \_\_\_\_\_

Select the appropriate box:

- APPEAL OF ZONING ADMINISTRATOR'S DECISION** \* (also complete Section 1 on reverse)
- CONDITIONAL PRIVILEGE** (also complete Section 2 on reverse)
- REZONING** (also complete Section 3 on reverse)
- SPECIAL EXCEPTION** \* (also complete Section 2 on reverse)
- USE PERMIT** (also complete Section 2 on reverse)
- VARIANCE** \* (also complete Section 4 on reverse)

## INFORMATION REQUIRED FOR ALL APPLICATIONS:

Property Address/Legal Description: \_\_\_\_\_

Current Land Use: \_\_\_\_\_

Current Zoning: \_\_\_\_\_

Proposed Land Use: \_\_\_\_\_

*(If no specific use is proposed, please note.)*

PROPOSE TO:

- Use an existing building
- Construct an addition
- Construct a new building

## OWNER INFORMATION:

Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

## APPLICANT INFORMATION: *(if different from 'Owner')*

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Applicant's Agent: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

**OWNER AUTHORIZATION: I HEREBY SUBMIT THAT I AM THE FEE-SIMPLE OWNER OF THIS PROPERTY. I HAVE READ THIS APPLICATION AND IT IS SUBMITTED WITH MY FULL KNOWLEDGE AND CONSENT. I AUTHORIZE CITY STAFF AND REPRESENTATIVES TO HAVE ACCESS TO THE PROPERTY FOR INSPECTION. THE INFORMATION CONTAINED IN THIS APPLICATION IS ACCURATE AND CORRECT TO THE BEST OF MY KNOWLEDGE.**

OWNER'S NAME (please print) \_\_\_\_\_

OWNER'S SIGNATURE AND DATE \_\_\_\_\_

DEVELOPMENT OF ANY PROPERTY IS SUBJECT TO COMPLIANCE WITH ALL APPLICABLE CODES, REGULATIONS AND ORDINANCES, WHETHER OR NOT THEY ARE SPECIFIED IN THE APPROVAL OF ANY LAND USE APPLICATION.

# CITY OF HAMPTON, VIRGINIA LAND USE APPLICATION

*Please complete the applicable section:*

<b>SECTION 1: APPEALS OF THE ZONING ADMINISTRATOR'S DECISION</b>							
<b>FEE:</b> If Associated With Single Family Residential Use: \$75; All Others: \$200							
DATE OF THE DECISION BEING APPEALED: _____							
DESCRIPTION OF THE APPEAL:							
<b>--ALLOW AT LEAST TWO (2) BUSINESS DAYS AFTER HEARING BEFORE REQUESTING ANY PERMITS.--</b>							

<b>SECTION 2: CONDITIONAL PRIVILEGE; USE PERMIT; SPECIAL EXCEPTION</b>								
<b>FEES:</b> <b>CONDITIONAL PRIVILEGE:</b> \$650 <b>USE PERMIT:</b> \$650 <b>SPECIAL EXCEPTION:</b> If Associated With Single Family Residential Use: \$75; All Others: \$200								
<b>NOTE:</b> (a) Day Care, Bed & Breakfast, Communication towers require a supplemental information form be submitted with this application (b) Communication towers require additional information as specified in the Zoning Ordinance to be submitted with this application.								
PROPOSED HOURS OF OPERATION:		Mon	Tues	Wed	Thurs	Fri	Sat	Sun
FROM:								
TO:								

<b>SECTION 3: REZONING</b>							
<b>FEE:</b> \$650 for 1 <sup>st</sup> acre (or any part thereof) PLUS \$100 per additional acre (or any part thereof)							
<b>NOTE:</b> Rezoning requires a proffer statement to be submitted with this application.							
PROPOSED ZONING AND USE OF THE PROPERTY:							

<b>SECTION 4: VARIANCES</b>							
<b>FEE:</b> If Associated With Single Family Residential Use: \$75; All Others: \$200							
DESCRIPTION OF THE REQUEST:							
<p><b>* No variance shall be authorized by the board unless it finds:</b></p> <ol style="list-style-type: none"> <li>1. That strict application of the Ordinance would produce undue hardship</li> <li>2. That such hardship is not shared generally by other properties in the same zoning district and vicinity.</li> <li>3. That the authorization of such variance will not be of substantial detriment to the adjacent property and that the character of the district will not be changed by the granting of the variance.</li> </ol> <p><b>--ALLOW AT LEAST TWO (2) BUSINESS DAYS AFTER HEARING BEFORE REQUESTING ANY PERMITS.--</b></p>							

**PLEASE REVIEW THE "ADDITIONAL REQUIREMENTS" CHECKLIST (PAGE 3)  
BEFORE SUBMITTING YOUR APPLICATION.**

# CITY OF HAMPTON, VIRGINIA

## LAND USE APPLICATION

### ADDITIONAL REQUIREMENTS:

<b>ALL LAND USE APPLICATIONS MUST CONTAIN:</b>
<ul style="list-style-type: none"> <li>● <b>A completed Land Use Application Form</b> (including supplements, as necessary)</li> <li>● <b>A recent certified surveyed plat of the property.</b></li> <li>● <b>A brief narrative</b> describing the nature of the application.</li> <li>● <b>The application fee.</b> <i>This fee is non-refundable.</i> Only checks or money orders (made payable to the City of Hampton) will be accepted. Cash or purchase orders will NOT be accepted.               <ul style="list-style-type: none"> <li>● <b>APPEALS OF THE ZONING ADMINISTRATOR'S DECISION:</b> If Associated With Single Family Residential Use: \$75; All Others: \$200</li> <li>● <b>SPECIAL EXCEPTION:</b> If Associated With Single Family Residential Use: \$75; All Others: \$200</li> <li>● <b>USE PERMIT:</b> \$650</li> <li>● <b>CONDITIONAL PRIVILEGE:</b> \$650</li> <li>● <b>REZONING:</b> \$650 for 1<sup>st</sup> acre (or any part thereof) PLUS \$100 per additional acre (or any part thereof)</li> <li>● <b>VARIANCE:</b> If Associated With Single Family Residential Use: \$75; All Others: \$200</li> </ul> </li> <li>● Any delinquent real estate taxes owed on the subject property must be paid before an application may be processed.</li> <li>● <b><i>In addition to the above, some applications may require additional information.</i></b></li> </ul>
<b>COMMUNICATIONS TOWERS (USE PERMIT)</b>
<ul style="list-style-type: none"> <li>● Supplementary Form for Communications towers (2 pages)</li> <li>● Intermodulation Study</li> <li>● Zoning Ordinance Requirements (§20-5.1(4))</li> </ul>
<b>DAY CARES (CONDITIONAL PRIVILEGE or SPECIAL EXCEPTION)</b>
<ul style="list-style-type: none"> <li>● Supplementary Form for Day Cares (1 page)</li> <li>● Traffic Circulation Plan / Traffic Study for Day Care 3</li> <li>● Conceptual site plan</li> <li>● Licensing Requirements (Department of Social Services) <i>if applicable</i></li> <li>● Floor Plan (labeled and to-scale)</li> </ul>
<b>VEHICLE STORAGE (USE PERMIT)</b>
<ul style="list-style-type: none"> <li>● Zoning Ordinance Requirements (§20-5.1(2))</li> </ul>
<b>ADULT CARE RESIDENCE (USE PERMIT)</b>
<ul style="list-style-type: none"> <li>● Zoning Ordinance Requirements (§20-5.1(5))</li> </ul>

*Additional information such as (but not limited to) a conceptual site plan, building elevations, location of existing/proposed improvements (if not shown on plat), or a Stormwater Management Plan (see City Code §33.1-6 and §33.1-7) may be required by the Zoning Administrator or Planning Director after initial review of the application. Such information may be provided with the initial submission at the applicant's discretion.*

**Applicants for Rezoning, Conditional Privilege and Use Permit applications** must submit **35 copies** (reduced to no larger than 8½" x 17") of any required site plans, building elevations, landscape plans, color photographs, or other non-textual information.

**Applicants for Variance, Special Exception and Appeal applications** must submit **8 copies** (reduced to no larger than 8½" x 17") of any required site plans, building elevations, landscape plans, color photographs, or other non-textual information.

<b>SUBMITTAL OF LAND USE APPLICATIONS</b>	
<b>Variance/Special Exception/ Appeal of Zoning Administrator's Decision</b>	<b>Rezoning/Conditional Privilege/Use Permit</b>
<ul style="list-style-type: none"> <li>● <i>Submit to the Permit Office, 3<sup>rd</sup> floor City Hall, 22 Lincoln Street, Hampton, VA 23669.</i></li> <li>● <i>Telephone: 728-2444</i></li> </ul>	<ul style="list-style-type: none"> <li>● <i>Submit to the Planning Department, 1 Franklin Street, Suite 603, Hampton, VA 23669 (6<sup>th</sup> floor)</i></li> <li>● <i>Telephone: 727-6140</i></li> </ul>