



Norfolk

Department of Planning & Community Development

DEPARTMENT OF PLANNING & COMMUNITY DEVELOPMENT BUREAU OF ENVIRONMENTAL SERVICES (BES) Application for Building Activities Requiring Minor Site Plan Review Within the Chesapeake Bay Preservation Area (CBPA)

Date: _____ Project Location: _____
Adjacent Waterway: _____ Date Plans Received: _____
Log Book / Walk-In / On-Site (circle one)

- I. Proposed Project (*attach site plan*) _____
- II. Owner _____ Daytime Phone _____
Address _____
- III. SITE INSPECTION / VERIFICATION (BES)
Met with _____ Date Contacted _____ Meeting Date _____
CBPA Status: (RMA, RPA, IDA, not in CBPA) _____

Are Stormwater Best Management Practices (BMPs) required? yes no
If yes, attach calculations and modified site plan.

Are erosion and sediment control measures required? yes no
If yes, show location and type of controls on site plan.

Is any filling, clearing, or grading proposed? yes no
If yes, attach applicable permits.

Will any trees or shrubs be disturbed? yes no
If yes, attach applicable permit from Bureau of Parks & Forestry.

Are wetland or dune permits required by federal, state, or local law? yes no
If yes, attach applicable permits or NPNs.

Is a waiver or exemption required for this project? yes no
If yes, indicate what type and attach appropriate approvals.

___ Non-conforming Use / Development Waiver for Addition to Principle Structure
 ___ Exemption for Public Road / Railroad / Utility
 ___ Exemption for Water Dependent Use

IV. PROPERTY OWNER / AGENT APPLICATION CERTIFICATION

As the property owner / agent (circle one) representing the project described above, I hereby certify that the information presented in this application is true and correct. I understand that any changes, deletions, or revisions to the above project proposal will necessitate additional review by the Department of City Planning and Codes Administration. I also understand that the site plan is subject to additional review by the Zoning Administrator, which may necessitate plan revisions.

_____ _____ _____
Print Name Signature Date

V. FOLLOW-UP

Revised Plans Reviewed (BES) _____ BES Recommendation
Date Plans Reviewed (BES) _____ **Approve Deny**
Date Returned to BLS _____

VI. NON-CONFORMING USE AND DEVELOPMENT WAIVER / EXEMPTION DETERMINATION

Bureau of Environmental Services Recommendation
Name _____ Date _____ **Approve Deny**
Zoning Administrator Determination
Name _____ Date _____ **Approve Deny**