Checklist – Rezoning/Conditional Rezoning Application

Item	Yes	No	Not Applicable	Comments
Required application fee, **$705.00**				
If accompanied with a necessary map amendment to *plaNorfolk2030* – additional **$5**				
One 8½ x 14 inch or 11 x 17 inch copy of a physical survey				
One 8½ x 14 inch or 11 x 17 inch copy of a conceptual site plan				
Proffered Conditions				
Written description of purpose of rezoning				
Signature of property owner				
Is property in an AICUZ?				
Is property within ½ mile of another locality?				

Notes:

Applicant Signature:_____ Date: _____

Staff Signature:_____ Date: _____

CHANGE OF ZONING APPLICATION

DEPARTMENT OF CITY PLANNING

810 Union Street
Room 508
Norfolk, VA 23510
(757) 664-4752
(757) 441-1569 (FAX)
www.norfolk.gov/planning

Application Procedures

CHANGE OF ZONING APPLICATION

1. **A pre-application meeting is required.** To arrange for an appointment, please call (757) 664-4752.
2. Submit completed application with all required attachments including :
    - Completed Checklist
    - Survey/Site plan
    - Required application fee, **$705.00** (if check, make payable to the City of Norfolk).
        - Application fee includes a non-refundable $5 technology surcharge.
        - If accompanied with a necessary map amendment to the City's adopted general plan, *plaNorfolk2030*, an additional technology surcharge of **$5** will be required.
    - One 8½ x 14 inch or 11 x 17 inch copy of a physical survey, drawn to scale and showing site conditions and improvements (including portions of the right-of-way to the curb line):
        - Existing and proposed building structures
        - Driveways
        - Parking
        - Landscaping
        - Property lines (see attached example)
    - One 8 ½ x 14 inch or 11 x 17 inch copy of a conceptual site plan drawn to scale and showing all proposed site improvements, landscaping, drive aisles and parking with dimensions, and proposed changes to parcel/property lines (including lease lines) if applicable.
    - Written description and details of the operation of the business (i.e., # of employees, # of bays, reason for rezoning, etc…)
    - Description and details of request.
3. Staff will review application to determine completeness.
4. Applicant to contact appropriate Civic League prior to public hearing. Providing written documentation to Planning staff of any meetings, input from the Civic Leagues concerning your request is helpful to the Planning Commission.
5. Staff will post legal notice of application request and photograph subject property.
6. The Planning Commission will visit the site on the 2nd Wednesday of the month. it is not necessary for the applicant to be present).

DEPARTMENT OF CITY PLANNING
ZONING SERVICES
5TH FLOOR
(757) 664-4752 / (757) 441-1569 (FAX)

Application Procedures

7. Applicant must attend public hearing:

   ►Where: City Hall Building
   11th Floor, Council Chambers

   ►Time: 2:30 p.m.

8. During the Commission's hearing:
   ►Applicant must register to speak
   ►Staff will present application and recommendation
   ►Applicant/representative may make a presentation
   ►Proponents may speak
   ►Opponents may speak
   ►Rebuttal

9. The Planning Commission will make a recommendation on the application at their hearing which will be forwarded to City Council.
10. Applicant may contact staff 2 weeks after the hearing to obtain a tentative Council date (the City Manager's Office establishes the contents of Council's agenda).

CHANGE OF ZONING APPLICATION

DEPARTMENT OF CITY PLANNING
ZONING SERVICES
5TH FLOOR
(757) 664-4752 / (757) 441-1569 (FAX)

APPLICATION
CHANGE OF ZONING

Date of application: _____

Change of Zoning

From: _____ **Zoning** **To:**_____**Zoning**

DESCRIPTION OF PROPERTY

Property location: (Street Number) _____ (Street Name)_____
_____

Existing Use of Property:_____

Current Building Square Footage_____

Proposed Use_____

Proposed Building Square Footage_____

Trade Name of Business (If applicable)_____

APPLICANT

(If applicant is a LLC or a Corp./Inc., include name of official representative and/or all partners)

1. Name of applicant: (Last) _____ (First) _____(MI) _____

Mailing address of applicant (Street/P.O. Box):_____

(City) _____ (State) _____ (Zip Code) _____

Daytime telephone number of applicant (___) _____Fax (___) _____

E-mail address of applicant: _____

DEPARTMENT OF CITY PLANNING
810 Union Street, Room 508
Norfolk, Virginia 23510
Telephone (757) 664-4752 Fax (757) 441-1569
(Revised January, 2015)

AUTHORIZED AGENT (if applicable)
(If agent is a LLC or a Corp./Inc., include name of official representative and/or all partners)

2. Name of applicant: (Last) _____ (First) _____ (MI) ____

Mailing address of applicant (Street/P.O. Box): _____

(City) _____ (State) _____ (Zip Code) _____

Daytime telephone number of applicant (___) _____ Fax (___) _____

E-mail address of applicant: _____

PROPERTY OWNER
(If property owner is a LLC or a Corp./Inc., include name of official representative and/or all partners)

3. Name of property owner: (Last) _____ (First) _____ (MI) ____

Mailing address of property owner (Street/P.O. box): _____

(City) _____ (State) _____ (Zip Code) _____

Daytime telephone number of owner (___) _____ email: _____

CIVIC LEAGUE INFORMATION

Civic League contact: _____

Date(s) contacted: _____

Ward/Super Ward information: _____

CERTIFICATION:
I hereby submit this complete application and certify the information contained herein is true and accurate to the best of my knowledge:

Print name:_____**Sign:**_____**/**_____**/**_____
(Property Owner or Authorized Agent of Signature) (Date)

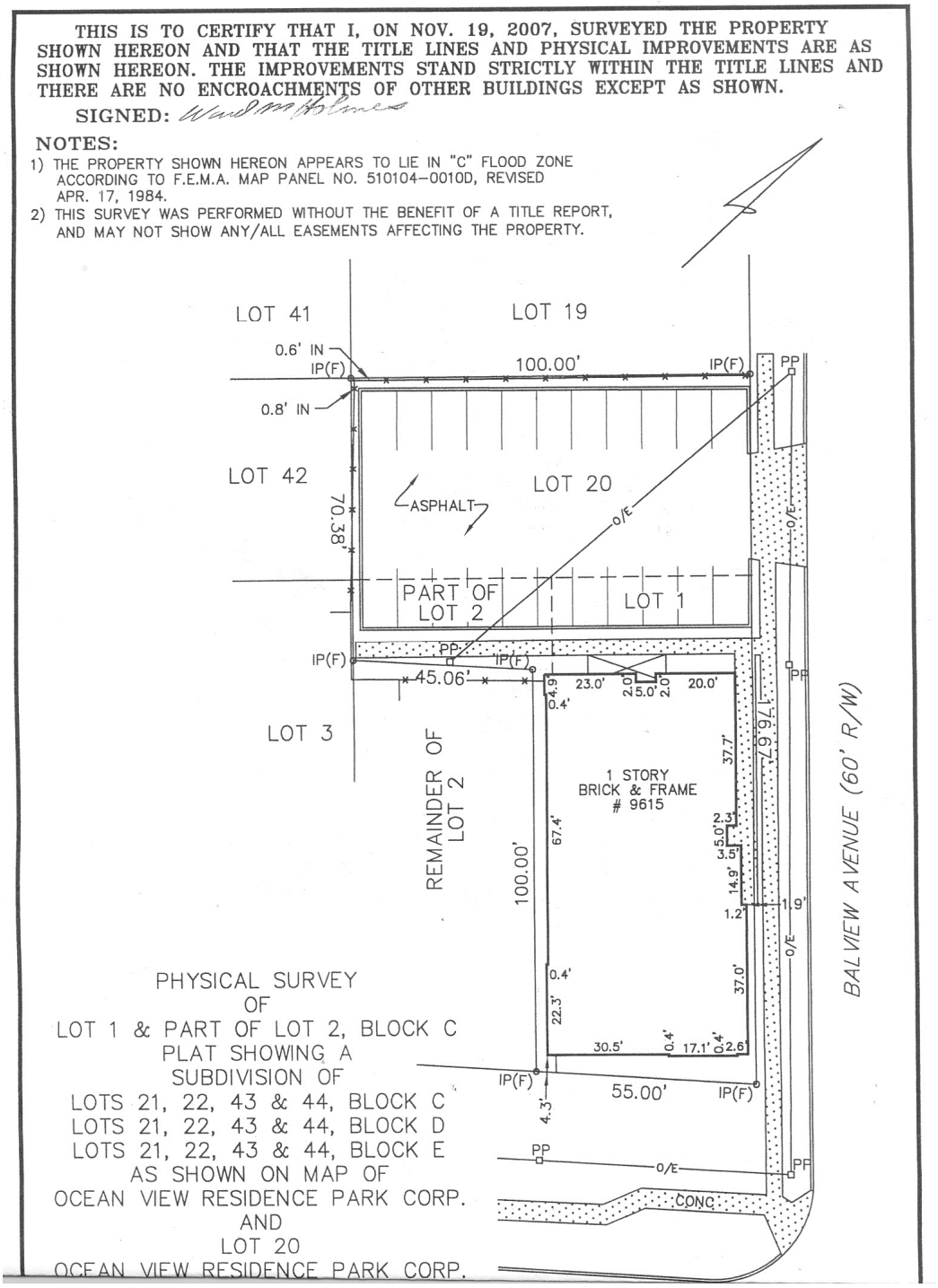
Print name:_____**Sign:**_____**/**_____**/**_____
(Applicant) (Date)

ONLY NEEDED IF APPLICABLE:

Print name:_____**Sign:**_____**/**_____**/**_____
(Authorized Agent Signature) (Date)

EXAMPLE

Site Plan



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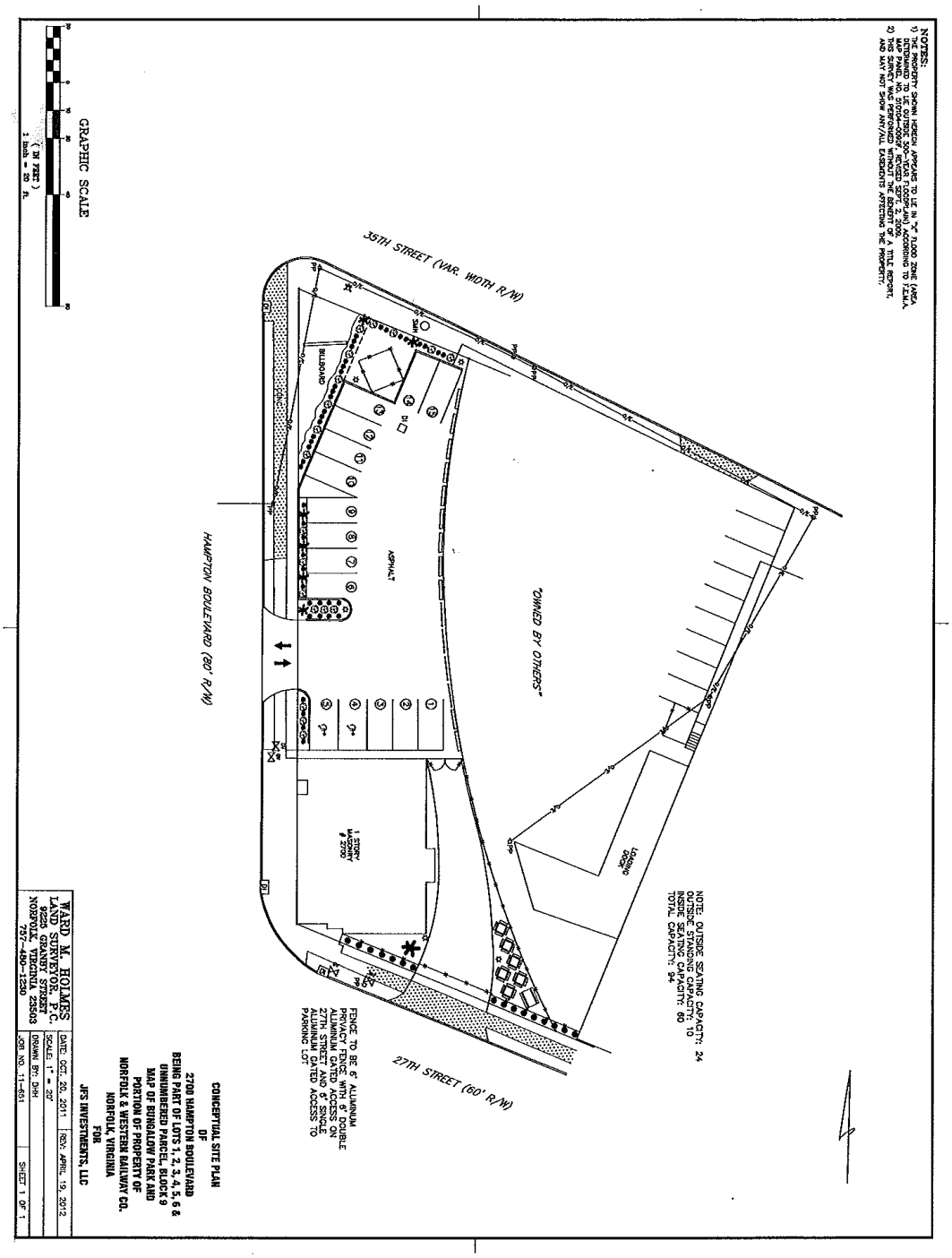
EXAMPLE

Conceptual Site Plan

(required for new construction or site improvements)



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