

TOWN OF WARRENTON, VIRGINIA

18 Court Street, P.O. Drawer 341

Warrenton, VA 20188-0341

(540) 347-2405

APPLICATION FOR ZONING PERMIT

NO. _____

Application is hereby made for a zoning permit in accordance with the description and for the purpose hereinafter set forth. This application is made subject to all Town and State Laws and Ordinances and which are hereby agreed to by the undersigned and which shall be deemed a condition entering into the exercise of this permit. The permit is valid for six (6) months from date of issuance. If not renewed prior to expiration, this permit is null and void.

FILL OUT COMPLETELY - INCOMPLETE APPLICATIONS *WILL NOT* BE PROCESSED

Record Owner as shown on deed:

Name: _____ Phone(Day): _____

Owner Mailing Address: _____

PIN#: _____ Zoning District: _____ Subdivision: _____ Lot No.: _____

Subject Property Street Address: _____

Acres: _____ Street Frontage: _____ Existing Structures(Number & Type): _____

Dimensions: Finished Area: _____ square feet Unfinished Area: _____ square feet

Height of Structure: _____ feet Cost of Construction: \$ _____

TYPE OF IMPROVEMENT:	PROPOSED USE:	
<input type="checkbox"/> New Building	<input type="checkbox"/> One Family, # of Bedrooms _____	<input type="checkbox"/> Church
<input type="checkbox"/> Addition	<input type="checkbox"/> Two or more Family, # of Bedrooms _____	<input type="checkbox"/> Industrial
<input type="checkbox"/> Alteration, Repair	<input type="checkbox"/> Transient Hotel, Motel, or Dormitory	<input type="checkbox"/> Service Station
<input type="checkbox"/> Demolition	<input type="checkbox"/> _____ # Units	<input type="checkbox"/> Hospital, Institutional
<input type="checkbox"/> Moving(relocation)	<input type="checkbox"/> Townhouse	<input type="checkbox"/> Office, Bank
<input type="checkbox"/> Foundation/Footing Only	<input type="checkbox"/> Apartment	<input type="checkbox"/> Public Utility
<input type="checkbox"/> Electrical	<input type="checkbox"/> Modular/Industrialized Home, # Bedrooms _____	<input type="checkbox"/> School, Library, Educational
<input type="checkbox"/> Temporary Electrical	<input type="checkbox"/> Manufactured (Mobile) Home, # Bedrooms _____	<input type="checkbox"/> Retail Store
<input type="checkbox"/> Mechanical	<input type="checkbox"/> Garage, Carport	<input type="checkbox"/> Tank, Tower
<input type="checkbox"/> Plumbing	<input type="checkbox"/> Pond	<input type="checkbox"/> Deck
<input type="checkbox"/> Swimming Pool	<input type="checkbox"/> Amusement, Recreational	<input type="checkbox"/> Other, Specify Below
<input type="checkbox"/> Change of Use	<input type="checkbox"/> Sign	
<input type="checkbox"/> Other, Specify Below	<input type="checkbox"/> Fence	

DESCRIBE IN DETAIL PROPOSED WORK BEING DONE:

Note: If use of building is being changed or if joint use is being added, enter all new proposed use(s) and also define existing use(s).

I hereby certify that I have read and examined this application and know the same to be true and correct. I hereby certify that the proposed work herein is authorized by the owner of record of the property identified above and, if agent, I have been authorized by the owner to make this application. All provisions of laws ordinances governing the above proposed work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other statement, local, or state law regulating construction or performance of construction.

Signature _____ Date _____ Print Name _____ Daytime Phone # _____

Relationship: Owner Agent Address (if agent): _____

FOR APPLICANT USE -- SITE PLAN

SCALE: 1" = _____

A copy of a recorded plat showing the proposed construction and distance from all property lines shall be filed with this application. If no plat exists, use this area for your plat plan.

Deed Book _____ Page No. _____
Date Plan Approved: _____ By Whom: _____

FLOODPLAIN INFORMATION:

Is this property within the 100-year floodplain (flood boundary) as defined on the Federal Emergency Management Agency (FEMA) Flood Insurance Rate Map? Yes No

If yes, is this proposed construction within 25 feet of that floodplain? Yes No FEMA Map # _____

OFFICIAL USE ONLY – ZONING STAFF

Zoning District: _____ Use: _____

Required Setbacks: Front: _____ Side: _____ Rear: _____

Notes:

Zoning Compliance: _____ Date: _____ Fee: _____