



## Application for Site Plan Amendment Review

Department of Neighborhood Development Services

P. O. Box 911, City Hall

Charlottesville, VA 22902

Telephone: (434) 970-3182

**Tax Map and Parcel Number(s)** \_\_\_\_\_

**Address(es)** \_\_\_\_\_

**Zoning** \_\_\_\_\_ **Overlay District(s)** (Circle Below) **Special Use Permit (Yes/No)** \_\_\_\_\_

Overlay Districts: Flood Hazard (FH), Architectural Design Control (ADC), Entrance Corridor (EC), Historic Conservation (HC)

**Note:** All projects subject to the Virginia Erosion and Sediment Control Program (VESCP) or Virginia Stormwater Management Program (VSMP) must include an Erosion and Sediment Control and Stormwater Management Plan application.

### Applicant Contact Information

Name \_\_\_\_\_

Company \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

### Owner Contact Information

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Owner's Signature and Right-of-Entry:** I, the undersigned, hereby grant the designated officer of the City of Charlottesville the right to enter my property for the purpose of inspection and monitoring for compliance with the approved site plan for this project.

Owner

Date

### Required application materials and fee:

- Ten (10) paper copies of the proposed site plan, properly collated, bound and folded.
- Correct application fee. Checks payable to "City of Charlottesville".

**Note: Incomplete applications will not be processed.**

Date Received: _____	Received by: _____
Fee: _____	Cash/Check # _____