



REZONING APPLICATION

CHESAPEAKE PLANNING DEPARTMENT

Conventional Conditional Revised Application No. _____

APPLICATION NUMBER: _____
(Assigned by Chesapeake Planning Department)

GENERAL INFORMATION

Project Name: _____

1. Applicant(s): _____
Address: _____
City: _____ State: ____ Zip: _____
Daytime Phone: _____ FAX Number: _____
E-mail address: _____
Interest in subject property: _____

2. Agent(s): _____
Agency: _____
Address: _____
City: _____ State: ____ Zip: _____
Daytime Phone: _____ FAX Number: _____
E-mail address: _____

3. Owner(s) of property: (If different from applicant)
Name: _____
Address: _____
City: _____ State: ____ Zip: _____
Daytime Phone: _____ FAX Number: _____
E-mail address: _____

DECLARATION

APPLICATION NUMBER: _____

PRIMARY TAX MAP NUMBER: _____

DECLARATION OF PLANNING COMMISSION / CITY COUNCIL INTEREST:

Does any member of the Planning Commission or City Council own or have any personal or financial interest in the land which is subject to this application, or has any personal or financial interest in the outcome of the decisions, as defined by the Virginia Conflict of Interest Act? No Yes If yes, please explain:

DECLARATION OF ACCURACY:

I, the undersigned, certify that this application is complete, accurate and contains all required and requested information, documents and other submittals, and that all statements made herein are, to the best of my knowledge, true and correct. I further certify that I have exercised due diligence to obtain the most recent, complete and correct information available. I understand that wrongful certification or failure to provide required or requested documents that become available after the initial submittal of this application may result in a delay in, or invalidation of, any official governmental action taken. Fraudulent representations may lead to additional penalties under law.

I, the undersigned, also certify that the list of adjacent property owners is complete and correct as of the date of this application submittal. I will update any changes in ownership of the property that is the subject of this application and adjacent property owners upon learning that any such property has been conveyed prior to final action on this application. I understand that if the list of adjacent property owners is determined to be inaccurate, out-of-date or incomplete at a later date, any action taken on this application may be deemed null and void.

DECLARATION OF FINANCIAL RESPONSIBILITY FOR ADVERTISING COSTS:

I, the undersigned, understand that the cost of newspaper advertising for public hearing notification purposes is my responsibility and agree to pay all notices of payment due and bills associated with advertising costs for this application, including all readvertisements for continuances and appeals. *Party responsible for advertising:* Applicant Agent

DECLARATION OF CONSENT:

I, the undersigned, consent to entry upon the subject property by public officers, employees, and agents of the City of Chesapeake wishing to view the site for purposes of processing, evaluating or deciding this application.

Applicant/Owner: _____

Applicant/Owner: _____

Applicant/Owner: _____

Agent: _____

DESCRIPTION OF PROPERTY

1. List all 13-digit Tax Map Number(s): _____,
_____, _____,
_____, _____.

2. Street Address (or common description if address is not available):

3. Borough: _____

4. Legal Description of the Property: _____

5. Physical location of the property including boundaries to the north, south, east, and west. State the street frontage, depth, and overall size in square feet/acreage:

DESCRIPTION OF PROPERTY

6. Zoning Information:

a. Zoning Sheet(s): _____

b. Current Zoning Classification(s), acreage of each zoning classification, and present use of the property: _____

c. Proposed Zoning reclassification(s) and acreage of each proposed zoning reclassification(s): _____

d. Zoning Overlay District Classification(s), or any special district established in the City Code, where applicable:

e. Adjacent property zoning and uses:

DIRECTION	ADJACENT ZONING DESIGNATIONS/USES
North	
South	
East	
West	

7. Check the Land Use Plan Overlay District in which the property is located:

Urban Suburban Rural

8. Land use designation of the property as contained in the City's Comprehensive Plan:

9. Planning Area: _____

DEVELOPMENT INFORMATION

RESIDENTIAL DEVELOPMENT PROFILE

	Enter Year Construction Begins	If Proffered, DUs per Gross Acre	Avg. Market Value Per Unit in Today's Dollars	Avg. Market Value of Comparable Unit in Vicinity	Cumulative Total Units
Townhouse					
Single Family Detached					
Single Family Attached					
Condominium					
Apartment					
Other (Pls. Describe):					

OTHER: _____

Average Units Built per Year for 5 Year Intervals

Years	1-5	6-10	11-15	16-20	21-25	26-30	31-35	36-40
Townhouse								
Single Family Detached								
Single Family Attached								
Condominium								
Apartment								
Other (Pls. Describe):								

OTHER: _____

DEVELOPMENT INFORMATION

NONRESIDENTIAL DEVELOPMENT PROFILE

	Enter Year Construction Begins	If Proffered, % of Lot Coverage	Avg. Market Value/Sales Price per Sq. Ft.*	Avg. Market Value/Sales Price of Comparable Sq. Ft. in Vicinity	Cumulative Total Sq. Ft.
Office/ Institutional					
Retail					
Industrial					
Lodging					
Other (Pls. Describe):					

*Based on construction costs, soft costs, profit & overhead.

OTHER: _____

Average Floor Area (000's Sq. Ft.) Built per Year for 5 Year Intervals

Years	1-5	6-10	11-15	16-20	21-25	26-30	31-35	36-40
Office/ Institutional								
Retail								
Industrial								
Lodging								
Other (Pls. Describe):								

OTHER: _____

DEVELOPMENT INFORMATION

Applicants must provide the following information on 8½ " x 11" size paper, numbered according to the questions in this section. Please restate the questions with your answers. All parts of the development information must be completed for all rezoning requests unless otherwise noted or expressly waived by in whole, or in part, by the Planning Director or respective reviewing department.

NATURE OF PROPOSED DEVELOPMENT

1.
 - a. Describe the nature of the use or uses proposed for the subject property under the proposed zoning classification.
 - b. Describe the planned development, including the total number of residential units, total square feet of office, commercial, and industrial uses.
 - c. Complete the Residential or Nonresidential Development Profile tables.
2. **OPTIONAL:** Thirty (30) copies of an exhibit of the proposed development drawn to scale and three (3) copies of this exhibit reduced to 8½" x 11" paper.

TRAFFIC IMPACT (To be completed by Agent or Consultant)

3.
 - a. Identify the roads or streets abutting the subject property.
 - b. Indicate if the proposed rezoning is **exempt** from the Level of Service (LOS) test for Adequate Road Facilities based on the following criteria:
 - The proposed residential rezoning will not allow for the creation of more than five (5) lots for single-family dwellings.
 - The proposed residential rezoning will not generate more traffic than would be generated by potential future development under the existing zoning.
 - The proposed nonresidential rezoning will not increase the traffic by more than fifty (50) total vehicle trips per day, as determined by the Director of Development and Permits or designee, than could be generated under the existing zoning.
 - Is the proposed rezoning exempt from the LOS test for adequate road facilities? Include all supporting information.
 - Yes No If no, additional traffic information may be required. Contact Traffic Engineering **prior to** any traffic data collection or analysis, to determine the extent of information needed for the LOS test for adequate road facilities and to determine whether a Traffic Impact Analysis (TIA) is required.

DEVELOPMENT INFORMATION

DRAINAGE IMPACT ANALYSIS (DIA)

4. The applicant shall address potential drainage impact issues, including how the proposed development will accommodate drainage impacts on the proposed site and surrounding upstream and downstream properties.
 - a. How will this project address increase in stormwater runoff as a result of development? Please note although the post-development peak flow is less than pre-developed, the increase of volume must be addressed in areas with existing deficiencies.
 - b. What steps will be taken to ensure adequacy of the receiving facility (off-site dynamic drainage analysis of watershed, improvements, etc.)?
 - c. Address whether the project will be required to provide for water quantity and/or water quality of stormwater runoff.
 - d. What off-site easements and/or improvements are required? What steps have been taken to ensure that these easements can be obtained and that improvements can be constructed?
 - e. Address the current adequacy of the existing drainage receiving facility.
 - f. Is this development subject to tidal impacts? How will the tides associated with a hurricane or northeaster affect the drainage system?
 - g. What steps have been taken to ensure no property damage will result from a 100-year tidal or rainfall event?

WATER AND SEWER IMPACT

5.
 - a. State whether, and in what respect, adequate water and sewer services exist or can be provided to serve the uses that would be permitted if the property were rezoned.
 - b. If septic tanks and private wells are proposed, provide a soil analysis for the subject property and documentation from the Chesapeake Health Department approving the site for septic tank use.

FIRE PROTECTION

6. State whether and explain in what respect adequate fire protection services exist or can be provided to serve the uses that would be permitted if the property were rezoned.

DEVELOPMENT INFORMATION

CONSISTENCY WITH THE COMPREHENSIVE PLAN

7. In what respect is the proposed zoning classification consistent with the Chesapeake Comprehensive Plan?

CHANGED CONDITIONS AND ERRORS

8. In what respect are there any changed or changing conditions in the area that make the proposed rezoning necessary?
9. In what respect will the proposed rezoning correct an error in the application of the Chesapeake Zoning Ordinance as applied to the subject property?

COMPATIBILITY OF USES WITH EXISTING USES

10. In what respect is the range of uses in the proposed zoning district classification compatible with the uses permitted on other property in the immediate vicinity?

EXISTENCE OF A VIABLE ECONOMIC USE

11. State and explain whether a reasonably viable economic use of the subject property exists under the current zoning classification.

CHESAPEAKE BAY PRESERVATION AREA

12. Is the property located within the Chesapeake Bay Preservation Area?
- No Yes If yes, submit an RPA and RMA delineation meeting the requirements of Section 26, Article X, of the Chesapeake City Code.

ENVIRONMENTAL SITE ASSESSMENT

13. Will the application involve land disturbance for residential, assembly, day care, group home, recreation, school, library, or similar land use?
- No Yes If yes, submit an Environment Site Assessment meeting the requirements of the Chesapeake Public Facilities Manual.

Additional information may be required by the reviewing departments, Planning Commission, or by City Council in order for the application to be fully and appropriately reviewed.

Notwithstanding such criteria, the Planning Director, the Planning Commission, or the City Council may at any time during the review process find that essential information is lacking and may deem the application incomplete and defer further review or action until such time that such information is provided.

SPECIAL POWER OF ATTORNEY

Application No: _____

Tax Map Number(s): _____

Property Description (Street Address, if assigned, or Common Description, Borough): _____

Nature of **zoning reclassification** sought: _____

I/we _____, am/are

the applicant(s) for the above referenced application; the owner(s) of the property described above and I/we do hereby make, constitute, and appoint _____

_____, my true and lawful attorney-in-fact, and grant unto my attorney-in-fact full power and authority to make application for the rezoning application described above, and to perform all acts and make all representations as such person shall deem necessary or appropriate in regard to said application, without any limitation whatsoever, including but not limited to the following authority: to submit proffers that would constitute binding conditions on the rezoning of the property, including limitations on its use, and to modify or amend any documents in whole or in part relating to the application.

The rights, powers, and authority of said attorney-in-fact herein granted shall commence and be in full force and effect on the _____ day of _____, 20____, and shall remain in full force and effect thereafter until actual notice, by certified mail, return receipt requested is received by the Planning Department of the City of Chesapeake stating that the terms of this power have been revoked or modified.

Applicant/Owner:

Applicant/Owner:

sign _____

sign _____

Name, Title _____

Name, Title _____

Company _____

Company _____

Commonwealth/State of _____

City of _____

Subscribed and sworn to before me this _____ day of _____, 20____,

NOTARY PUBLIC

Notary Registration Number: _____

My Commission expires on: _____

* If the owner or applicant is a corporation, partnership, or similar entity, documentation must be attached which establishes that the person signing on behalf of the entity has the authority to act on behalf of and to bind that entity.

STATEMENT OF OWNERSHIP

Application No: _____

The owner(s) and applicant(s) listed on the attached Change of Zoning Application, does/do hereby affirm that the listing attached to, and hereby made a part of this statement of ownership, identifies the names and last known addresses of all of the following persons and entities in regard to the property that is the subject of the application:

1. All applicants, title owners, contract purchasers, and lessees of the property; and, if any of the foregoing is a trustee, each beneficiary having an interest in the property.
2. Where any of those listed in (1) above is a corporation, all shareholders owning ten per cent (10%) or more of any class of stock issued by said corporation and where any of those listed in (1) above is a corporation having ten (10) or fewer shareholders, all such shareholders. This requirement may be waived by the Planning Director where the owner or applicant, as applicable, is a publicly-held corporation.
3. Where any of those listed in (1) above is a partnership, or limited liability company, all such partners, both general and limited, in a partnership, and all members of a limited liability company.
4. Where any of those listed in (1) above is a church, provide a list of all such trustees or if no trustees, then identify the president or vice-president of the corporation or association of the church.

Attach the listing of names and addresses on business letterhead of either the applicant, owner or agent, as required above.

Applicant/Owner:

Applicant/Owner:

sign _____

sign _____

Name, Title _____

Name, Title _____

Company _____

Company _____

Commonwealth/State of _____

City of _____

Subscribed and sworn to before me this _____ day of _____, 20____,

NOTARY PUBLIC

Notary Registration Number: _____

My Commission expires on: _____

ADJACENT PROPERTY OWNERS LIST OF ADDRESSES

Tax Map #: _____	Tax Map #: _____
Name: _____	Name: _____
Street: _____	Street: _____
City: _____	City: _____
State/Zip: _____	State/Zip: _____

Tax Map #: _____	Tax Map #: _____
Name: _____	Name: _____
Street: _____	Street: _____
City: _____	City: _____
State/Zip: _____	State/Zip: _____

Tax Map #: _____	Tax Map #: _____
Name: _____	Name: _____
Street: _____	Street: _____
City: _____	City: _____
State/Zip: _____	State/Zip: _____

Tax Map #: _____	Tax Map #: _____
Name: _____	Name: _____
Street: _____	Street: _____
City: _____	City: _____
State/Zip: _____	State/Zip: _____

Tax Map #: _____	Tax Map #: _____
Name: _____	Name: _____
Street: _____	Street: _____
City: _____	City: _____
State/Zip: _____	State/Zip: _____

Tax Map #: _____	Tax Map #: _____
Name: _____	Name: _____
Street: _____	Street: _____
City: _____	City: _____
State/Zip: _____	State/Zip: _____

REZONING APPLICATION CHECKLIST

The following items are required as part of the filing for a rezoning application:

- FILING FEE: \$370 plus _____ acres @ \$20.00 per acre to be rezoned \$ _____**
Please make the check payable to: *City of Chesapeake*
- The original and three (3) copies of the complete Rezoning application**, with ORIGINAL SIGNATURES ON ONE COPY, including all required development information. All information must be typed or clearly printed on the application and 8½" x 11" paper as needed. *Please incorporate each of the following to complete an application:*
 - Special Power of Attorney**, if applicable, see instructions.
 - Statement of Ownership with required listing**, see instructions.
 - Real Estate Tax Demonstration Form**, see instructions.
 - Adjacent property owner's list of addresses** on the form provided with this application or Avery 5260 label format.
 - Proffer Statement**, if applicable.
 - Title report or title certification letter**, not more than six (6) months old.
 - Zoning map** reduced to 8½" x 11" paper.
 - Survey of the property** reduced to 8½" x 11" paper.
 - Vicinity map** on 8½" x 11" paper. *This may be included on the survey of the property.*
- Four (4) copies of the **Environmental Site Assessment, Phase I and \$1,600.00 supplement review fee, when applicable.**
- OPTIONAL:** Thirty (30) copies of an exhibit of the proposed development drawn to scale and three (3) copies of this exhibit reduced to 8½" x 11" paper to be included with the application.
- Stamped #10 (4 1/8" x 9½") envelopes** with the name and mailing address of each adjacent property owner printed legibly. **(Please do not use pre-stamped, dated envelopes from a postage machine. Also, do not include your a return address on the envelopes.)**
- SIGN FEE.** The applicant is responsible for proper posting of sign(s) on the property. The sign fee is \$25.00 for the first sign, \$20.00 for each additional sign, as required. You will be phoned and advised of when the sign(s) must be posted. Applicants are encouraged to take pictures of the signs after posting and provide them to the Planning Department as proof that the signs were properly posted.
- In addition to the filing fee, the applicant is responsible for all newspaper advertising costs for public hearing notifications. **The applicant will be billed separately for these costs.** The average advertising cost is \$100 for the Planning Commission Public Hearing and the average is between \$400 to \$1,000 for the City Council meeting. The project will require a minimum of four (4) advertisements. Any additional advertising costs incurred due to continuances or revised proffer statements will also be the responsibility of the applicant. Planning Commission advertisement fees will be billed by the City of Chesapeake. City Council advertisement fees will be billed by the Virginia Pilot.
- This completed Rezoning Application checklist.

PROFFER STATEMENT

Application No: _____ Initial & Date: _____

Name and Address of Applicant(s): _____

Name and Address of Owner(s): _____

Tax Map Number(s): _____

Description of land (may be general, street address and acreage, however, a legal description must be attached. Copy of appropriate deed or plat may be accepted only at discretion of the Planning Director.)

Description of Proposed Rezoning: *(Please state the existing and proposed zoning including the amount of acreage included in each existing and proposed zoning district.)*

Date Application Filed: _____

The above named owner(s), and applicant(s), hereby proffer, as a part and provision of the above referenced rezoning, that the use and development of this property shall be in strict accordance with the following conditions, which shall constitute covenants running with said property, and which shall be binding upon the property and upon all parties and persons claiming under or through the owners and applicants, their heirs, personal representative, assigns, grantees and other successors in interest or title:

PROFFER STATEMENT

Application No: _____ Initial & Date: _____

This section provides an opportunity for applicants to indicate whether they are proffering a particular development arrangement or any special improvements or amenities as part of the proposed development to make the request more compatible with existing and planned development in the area and to address the impacts of the rezoning on public infrastructure and services.

- Provide a specific statement as to whether this application is being submitted as an application for a conventional rezoning or conditional rezoning. If the application is for a conditional rezoning, state any proffers or conditions to be considered with the application on the attached proffer statement. See Special Notes on Conditional Rezoning Applications on the following page.
- If any proffers involve land dedication, cash proffers, or other fees, complete the Cash Proffers & Improvements table:

CASH PROFFERS & IMPROVEMENTS

	Roads	Schools	Library	Fire/EMS
Acres of Land Dedicated				
Value of Improvements				
Cash Proffers				
Other Fees				

The authorized applicant(s) and owner(s) certify that soil tests have been performed on dedicated land, other than right-of-way, and that certified findings show the land to be suitable for its intended use.

In the event that land dedicated or money provided to the City in accordance with the proffered conditions are not used for the specific purpose originally intended under this proffer, the applicants and owners propose that such property and/or money be treated as follows:

NOTE: The final proffer statement shall be submitted within ten (10) calendar days after the Planning Commission meeting when action was taken. If the statement is not submitted within this time frame, the application may be removed from the City Council agenda and delayed until said statement is received. In order to be deemed complete, this proffer statement must be signed and initialed by the owner(s) and the applicant(s). All signatures must be notarized. All initials must be dated (date of initials must match date of signature).

PROFFER STATEMENT

Application No: _____ Initial & Date: _____

The applicants and owners, for themselves, their heirs, personal representatives, assigns, grantees, and other successors in interest or title, voluntarily and without any requirement by or exaction from the City of Chesapeake or its governing body, proffers these conditions, acknowledging that the proposed rezoning itself gives rise to the need for the conditions, that such conditions have a reasonable relation to the rezoning, and that all such conditions are in conformity with the City's Comprehensive Plan. The applicants and owners further acknowledge that the City is in no way obligated to rezone the subject property; that in the event the property is rezoned, the conditions proffered shall continue in full force and effect unless or until they are modified by subsequent amendment to the zoning ordinance; and that the applicants and owners, their heirs, personal representatives, assigns, grantees, and other successors in interest or title, shall not be released from the responsibility of fulfilling each of the enumerated conditions by virtue of any variance or other change in or to the zoning ordinance.

This proffer statement supersedes any and all previously submitted proffers.

WITNESS our signatures. *(This proffer statement must be signed, initialed and dated by all owners of record and by the applicants if the applicants are different from the owners of record. All signatures must be notarized.)*

Applicant/Owner:

Applicant/Owner:

sign _____

sign _____

Name, Title _____

Name, Title _____

Company _____

Company _____

Commonwealth/State of _____

City of _____

Subscribed and sworn to before me this _____ day of _____, 20__

by _____

NOTARY PUBLIC

Notary Registration No. _____

My Commission expires: _____

Commonwealth/State of _____

City of _____

Subscribed and sworn to before me this _____ day of _____, 20__

by _____

NOTARY PUBLIC

Notary Registration No. _____

My Commission expires: _____

PROFFER STATEMENT

Application No: _____ Initial & Date: _____