

## ZONING/DEVELOPMENT PERMIT APPLICATION

By submission of this Application for Zoning/Development Permit, the Applicant requests the Town of Damascus to permit the use of property as described below. *If in the designated Special Flood Hazard Area (SFHA), all development must be in conformity with the National Flood Insurance Program (NFIP).* Further, the Applicant hereby certifies that the Applicant is the Owner of the property or that the Applicant is authorized by the Owner to file this Application with the Office of the Zoning Administrator, which may affect allowed usage of the property. **ALL SECTIONS OF THE APPLICATION MUST BE FILLED OUT COMPLETELY.** False or misleading information shall result in voiding of the Application and of any permit that may have been issued in reliance on such Application. *Deadline for acceptance of Applications to be included on the agenda of the next normally scheduled meeting of the Planning Commission will be noon (12:00 PM) of the preceding Thursday before the meeting.*

Date of Submission: \_\_\_\_\_

<b>Applicant:</b> <input type="checkbox"/> Owner <input type="checkbox"/> Other Name: _____ Phone #: ( ____ ) _____ E-mail: _____	<b>Property:</b> Street Address: _____ Tax map/parcel #: _____
<b>Owner:</b> Name: _____ Mailing Address: _____ City/State/Zip: _____ Phone #: ( ____ ) _____ E-mail: _____	<b>Owner 2 (If Applicable):</b> Name: _____ Mailing Address: _____ City/State/Zip: _____ Phone #: ( ____ ) _____ E-mail: _____
<b>Current zoning:</b> _____	<b>Current Use (Describe below):</b> _____ _____
<b>Application Purpose:</b> <input type="checkbox"/> Change of Use <input type="checkbox"/> Conditional Use <input type="checkbox"/> Variance/rezoning <input type="checkbox"/> New Construction <input type="checkbox"/> Renovation/reconstruction (insert estimated cost: _____ ) <input type="checkbox"/> Subdivision	
<b>Proposed Use:</b> <input type="checkbox"/> Single-family dwelling <input type="checkbox"/> Multi-family dwelling <input type="checkbox"/> Commercial enterprise <input type="checkbox"/> Industrial enterprise <input type="checkbox"/> Combined residential/commercial <input type="checkbox"/> Combined commercial/industrial <input type="checkbox"/> Agricultural/vacant	
<b>Flood Zone (SFHA):</b> <input type="checkbox"/> Floodplain (1% chance annual flood) <input type="checkbox"/> Floodway <input type="checkbox"/> Not in SFHA	
<b>Name of Enterprise (To be located on property):</b> <input type="checkbox"/> Not applicable <input type="checkbox"/> Undetermined _____	
<b>Proposed Use of Property (Narrative information):</b> _____ _____ _____ _____	

**Transient/semi-transient Lodging:**

Units to be rented: \_\_\_\_\_ Parking spaces provided: \_\_\_\_\_ Health Department Permit: \_\_\_\_\_ (Y/N)

**Commercial/industrial Use:**

Building square footage: \_\_\_\_\_ Parking provided: \_\_\_\_\_ Loading facilities: \_\_\_\_\_ (Y/N) Waste facilities: \_\_\_\_\_ (Y/N)

**Site Plan / Preliminary Plat:**

The following information **MUST BE** included on the Site Plan/Plat:

1. All physical dimensions of existing and proposed structures and improvements, including structure heights and building stories, drives, and dumpsters.
2. Distances in linear feet between structures, buildings, property lines, easements, right-of-ways, and streams on property.
3. Lot dimensions and locations of all right-of-ways and streams on property.
4. Washington County Certificate of Occupancy (if applicable).
5. VDOT Entrance Permit (if applicable).
6. Erosion and Sediment Control Permit (if applicable).
7. Virginia Health Department Permit (if applicable).

**SFHA Attachments (Floodplain):**

8. Elevation Certificate (if applicable).
9. Washington County Building Permit (if applicable).
10. Hydraulic and Hydrologic Study (if applicable).
11. "No-Rise" Certification (if in Floodway).

*The Town reserves the right to require applicants to submit additional information deemed necessary for the purpose of granting a Permit. Site Plans may be rejected due to lack of accuracy, precision, or other deficiencies. Survey information or deed information may be required.*

**Application Fee:** Zoning/Development Permit (change of use/new construction): N/A  
Variance/ Conditional Use Permit / Subdivision: \$125  
Rezoning (Amendment): \$250

**Certification Statement:**

*I (we) hereby certify that the information stated on this Application for Permit is true and correct and contain an accurate description of the proposed use for the referenced property above. Furthermore, I (we) hereby certify that no past due taxes are owed to the Town, unless there has been a formal agreement with the Town for payment.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICIAL USE ONLY:**

Date/time received: \_\_\_\_\_ Fee Paid: \_\_\_\_\_

Zoning Permit: \_\_\_\_\_  Conditional Use: \_\_\_\_\_  Variance/Subdivision: \_\_\_\_\_  Rezoning: \_\_\_\_\_

Approved  Denied Reason for Denial: \_\_\_\_\_

Minutes approved: \_\_\_\_\_

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_