



TOWN OF COLONIAL BEACH
Department of Planning & Community Development
315 Douglas Avenue
Colonial Beach, VA 22443
(804) 224-7506
(804) 224-1318 Fax
www.colonialbeachva.net

APPLICATION CHECK LIST FOR A SPECIAL USE PERMIT

In order to process your building permit the following items must be submitted if applicable. Failure to submit a complete package shall result in a delay in approving and releasing the permit.

SPECIAL USE PERMIT APPLICATION CHECKLIST

APPLICANT	ITEMS REQUIRED	STAFF
<input type="checkbox"/>	A Completed and Signed Special Use Permit Application	<input type="checkbox"/>



THE TOWN OF COLONIAL BEACH, VIRGINIA
DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT

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ZONING APPLICATION FOR A SPECIAL USE PERMIT

Application Date: _____

Permit Number: _____

Deposit	Type:	Amount: \$	DH#:
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Zoning application is hereby made for a Special Use Permit in accordance with the description and for the purpose set forth herein. This application is made subject to all Town and State laws and regulations, which are hereby agreed to by the undersigned and which shall be a condition of this permit.

ALL APPLICABLE INFORMATION MUST BE COMPLETED OR APPLICATION WILL BE RETURNED. (Please Print)

Owner Information	Name _____		Daytime Telephone No. _____	
	Mailing Address _____			
	E-mail Address _____		Fax Number _____	

Builder/ Applicant	Name _____		Telephone No. _____	
	<input type="checkbox"/> Same as Owner	Mailing Address _____		
	E-mail Address _____		Fax Number _____	

Property Information	Address _____			
	Tax Map ID # _____	Area (in acres & sq. ft.) _____		
	Current Deed Book/Page # _____	Lot # _____	Block _____	Section _____
	Existing Use of Property _____			
	Existing Structures on Property _____			
	Existing Structures to be removed _____ Type _____			

SPECIAL USE PERMIT SUPPLEMENTAL QUESTIONS/INFORMATION

Reason for Special Use: _____

Mechanic Lien Agent

Name _____ Telephone No. _____

None Designated

Mailing Address _____

General Contractor /Subcontractor Information	State Contractor's License No. & Class	State Tradesman Certification No.	Colonial Beach Business License No.

I certify that all licenses and certifications required by the State of Virginia and the Town of Colonial Beach are current at the time of application. Please notify this office immediately of any changes to the above-noted subcontractors. A complete list of subcontractors will be submitted prior to 1st inspection.

Print Name _____ Contractor Signature _____ Date _____

ALL BUILDERS OR OWNER-DEVELOPERS THAT CONTRACT TO BUILD FOR OTHERS ON PROPERTY THAT THE BUILDER OR OWNER-DEVELOPER OWNS, MUST BE LICENSED UNDER THE PROVISIONS OF § 54.1-1101 CODE OF VIRGINIA

Owner's Affidavit (Acting as contractor) I, _____, affirm that I am the owner of a certain tract or parcel of land located at: _____ and that I have applied for a building permit. I affirm that I am familiar with the prerequisites of §54.1-1101 of the Code of Virginia and I am not subject to licensure as a contractor or subcontractor. I also affirm that I will be responsible for meeting the code standards.

- I further affirm that I will:
- reside in this house for at least 24-months
 - give this house to an immediate family member and they will live in this house for at least 24-months
 - Other (Explain) _____

Owner's signature

Notary signature

Signed and acknowledged by _____ in the city or county of _____, of Virginia on this _____ day of _____, 20____. In the presence of the undersigned witness. Notary No. _____ Expires: _____

Applicant Certification

I hereby certify that I have the authority to make the foregoing application, that the information given is correct, including any attached plans or drawings, and that all construction will conform to all applicable state and town laws, ordinances and regulations with regard to zoning, environmental, health and building. Failure to do so shall automatically render this permit invalid. I understand that construction requires a zoning permit issued by the Colonial Beach Department of Planning & Community Development. I understand that construction must commence within 6 months of the issuance of this permit or the permit is rendered void, subsequent inspections must comply with Section 110.6 (Abandonment of Work) of the Uniform Statewide Building Code. I further understand that the land may not be used or occupied, and buildings structurally altered or erected may not be used or changed in use, until the Certificate of Occupancy is issued. I further permit Town officials or any other governmental agency representatives to enter the property to ensure that the property is being constructed in compliance with all governmental regulations; local, state and federal and that any proffered conditions have been and continue to be implemented. Revocation of Permit: The zoning/building official may revoke a permit or approval issued under the provisions of the Zoning Ordinance/USBC in case of any false statement, misrepresentation of fact or incorrect information supplied by the applicant in the application or construction documents on which the permit or approval was based. I also acknowledge that it is my responsibility to obtain any stormwater permit from the Commonwealth of Virginia - Department of Environmental Quality.

Date

Owner or Applicant Signature

Please Print name