



REZONING APPLICATION

King William County
Department of Community Development

180 Horse Landing Road #4
King William, VA 23086
804-769-4980

1. Please fill out the application form completely. If the spaces provided are not adequate, attach additional pages as needed. Remember to sign the application and have it notarized in the space provided. Normally, the property owner signs the application, but the owner may give written permission to a lawyer, contract purchaser, or other agent to apply for the rezoning. Such written permission needs to be included with the application, showing the owner has authorized the rezoning application to be filed and whether the owner's agent is authorized to submit proffered conditions.
2. An engineered survey plat of the property being requested for rezoning is required as part of the application (this may be waived if the property is in a recorded subdivision). We will need one copy of the plat on either an 8.5" x 11" or 11" x 17" sheet. In addition, a legal (e.g. "metes and bounds") written description of the subject property also is required. Please attach the survey and written description to the application form.
3. An application fee of \$2,500, made payable to King William County, is necessary to file a rezoning application.
4. King William County is authorized to accept proffered conditions as part of a rezoning application. Proffered conditions may be cash contributions, voluntary limitations, or other conditions that will affect development of the property. Proffered conditions are in addition to the minimum requirements of the zoning ordinance. They are submitted voluntarily to help address the impact of the proposed development on public infrastructure and assist with the goal of protecting the public health, safety and welfare. Please use the separate form provided, and attach any proposed proffers to the rezoning application when submitted. You may modify your initial proffered conditions based on input from the public, staff, Planning Commission and others, but the proffered conditions must be in final form prior to the public hearing with the Board of Supervisors.



REZONING APPLICATION

King William County

Department of Community Development

180 Horse Landing Rd. #4 King William, VA 23086

Phone (804) 769-4980 **Fax** (804) 769-2235

1. Owner:

Name: _____

Address: _____

Phone: _____

2. Applicant: (if different from Owner):

Name: _____

Address: _____

Phone: _____

3. Property identification:

(a) Size (acres): _____ Road frontage (feet): _____

(b) Describe exact location in detail:

(c) Tax Map: _____

(d) Deed recorded in Deed Book _____ at Page _____

Plat recorded in Plat Book _____ at Page _____

(e) If property is in a recorded subdivision, give:

Name of Subdivision: _____

Section: _____ Block: _____ Lot(s): _____

(f) If property is not in a recorded subdivision, attach a typed or printed copy of the legal description (i.e., metes and bounds) of the boundaries of the property.

(g) Present zoning district: _____

(h) Present use of property: _____

4. Proposed change to existing zoning of property:

(a) Proposed zoning district: _____

(b) Proposed use if rezoned: _____

(c) If only a portion of a parcel is to be rezoned, or if more than one new zoning district is requested on a parcel, please attach additional page(s) with the written legal description (metes and bound or bearings and distances) of boundaries of proposed zoning district(s).

5. Zoning History:

(a) Has the property been the subject of a rezoning request any time during the last year? _____ (There is a minimum one-year period during which the Board of Supervisors cannot act on an identical or substantially similar rezoning request on the same property.)

6. Adjacent Property Owners List:

- (a) Please list below the names and mailing addresses of all owners of property adjoining or directly across the road from the property proposed to be rezoned. (Planning Office staff can assist with completing this list if needed)

NAME	MAILING ADDRESS
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

7. Owner or Applicant's signature and certification: (Note: a power of attorney must be granted by the owner to the applicant if signed by someone other than the owner)

I hereby certify that the information provided in this application is complete and accurate to the best of my knowledge. I hereby authorize members of the Planning Commission and County staff or their representatives to enter upon the property identified in this application in order to perform inspection and research in regard to this application.

Owner or Applicant

CERTIFICATE OF NOTARY PUBLIC

STATE OF: _____ **COUNTY OF:** _____, to-wit:

The foregoing instrument was acknowledged before me this ____ day of _____, 20____.

Notary Public

My Commission Expires

FOR OFFICE USE ONLY

Zoning Map Amendment Case # _____

Date Application Filed: _____

Date(s) reviewed by Planning Commission: _____

Public Hearing Date: _____

Action by Planning Commission: _____

Action by Board of Supervisors: _____

Effective 12-2019