

Charlotte County, Virginia
Zoning Permit Application

PO Box 608
Charlotte Court House, VA 23923

Phone: 434-542-5117
Fax: 434-542-5248

Application Date _____

Application is hereby made for a Zoning Permit in accordance with the description, use and purposes hereinafter set forth. This application is made subject to all local and state laws and ordinances, which are hereby agreed to by the undersigned and which shall be deemed a condition entering into the exercise of this permit.

Owner's Name: _____ Phone Number: _____

Mailing Address: _____

Tax Map Number: _____ Number of Acres: _____

Zoning District: _____

Location of Property (if different from mailing address): _____

Is Property in a Subdivision? Yes No If yes, Provide Subdivision Name: _____

Water Supply: Existing Well New Well Town/Public Water

Sewage Disposal: Existing Septic Tank New Septic Tank Public Sewer

Description of Proposed Structure & Use: _____

List All Existing Structures on Property: _____

Sketch proposed structure, all roads, property lines & existing structures, showing distances to property lines & roads:

I hereby certify that I have the authority to make the foregoing application, that the statements made and information given is correct and the construction of any building or the location of any structure on the tract or lot which is the subject of this application will conform to the regulations in the building code, zoning ordinance and private building restrictions, if any, which may be imposed upon the property by deed.

Signature of Owner: _____ Signature of Witness: _____

Official Use Only (check one)	<input type="checkbox"/>	Approved	Comments:
	<input type="checkbox"/>	Conditional Use Permit Required	
	<input type="checkbox"/>	Rejected	

Zoning Administrator

Date