

## CONDITIONAL USE PERMIT APPLICATION Charlotte County, Virginia

250 LeGrande Avenue, Suite A, PO Box 608, Charlotte Court House, VA 23923 Phone: 434-542-5117 Fax: 434-542-5248

## PROPERTY DESCRIPTION

PROPERTY DESCRIPTION
Tax Map Parcel Number(s):
Property Address (if an E-911 address has not been assigned, provide directions to site):
Current Zoning: Proposed Zoning:
Current Use(s):
Proposed Use:
Total Lot Area (Acres): Does proposed use include entire property? [ ] YES [ ] NO
If no, how much will be used for proposed use?
APPLICANT
Name:
Mailing Address:
Telephone Number(s):
E-mail Address:
PROPERTY OWNER (If different from applicant)
Name:
Mailing Address:
Telephone Number(s):
E-mail Address:

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Water Supply: Public Water Private Well					
Is water supply [] New or [] Existing?					
Sewage Disposal: Public Sewer Private Septic					
Is sewage disposal system [] New or [] Existing?					
APPLICANT SIGNATURES					
As the Applicant, I hereby certify that this application is complete and accurate to the best of					
my knowledge, and I freely consent to its filing. I authorize Charlotte County officials and other					
authorized government agents on official business to enter the property as necessary to					
process this application.					
Signature					
Signature:Date:Date:					
Printed NameDate					
Signature:					
Printed Name:Date:					
OWNER SIGNATURES					
As the Owner or Owner's Power of Attorney, I hereby certify that this					
application is complete and accurate to the best of my knowledge, and I freely consent to its					
filing. I authorize Charlotte County officials and other authorized government agents on official business to enter the property as necessary to process this application.					
business to effect the property as necessary to process this application.					
Signature:					
Printed Name:Date:					
Signature:					
Printed Name:Date:					
Signature:					

signature page. All owners must sign the Conditional Use Permit application.

\*If there are more than three owners, please contact the County to request an additional

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

In accordance with the Charlotte County Zoning Ordinance, additional documents may be required before this application is considered complete. County staff can assist you in determining specific requirements associated with your application.

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