

**COUNTY OF GOOCHLAND**  
**Goochland, Virginia**



**APPLICATION FOR**  
**CONDITIONAL USE PERMIT**  
**FOR**  
**COMMUNICATIONS TOWERS**

**APPLICATIONS APPLIED FOR**

**IN THE PLANNING AND ZONING DEPARTMENT**

\_\_\_\_\_ **VARIANCE** (VAR \_\_\_\_\_ )

\_\_\_\_\_ **REZONING** (RZ \_\_\_\_\_ )

\_\_\_\_\_ **CONDITIONAL USE PERMIT** (CU \_\_\_\_\_ )

\_\_\_\_\_ Pre-application meeting and questionnaire with **planning staff** before filing the application. Date of meeting \_\_\_\_\_.

\_\_\_\_\_ Community/neighborhood meeting. Date of meeting \_\_\_\_\_

\_\_\_\_\_ Application complete

\_\_\_\_\_ Application signed and notarized.

\_\_\_\_\_ Fees submitted

\_\_\_\_\_ Pre-application checklist completed

\_\_\_\_\_ Site plan submitted with all the requirements of the application.

\_\_\_\_\_ Building Inspection – for change of use – building permit required.

\_\_\_\_\_ Plan of development will be required for new or change of use

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

\_\_\_\_\_ **PRE-APPLICATION MEETING** \_\_\_\_\_

\_\_\_\_\_ **COMMUNITY/NEIGHBORHOOD MEETING**

\_\_\_\_\_ **DEVELOPMENT REVIEW COMMITTEE**

\_\_\_\_\_ **REZONING APPLICATION RECEIVED IN PLANNING OFFICE**

\_\_\_\_\_ **COMPLETE APPLICATION RECEIVED**

\_\_\_\_\_ **PLANNING COMMISSION PUBLIC HEARING**

\_\_\_\_\_ **BOARD OF SUPERVISORS PUBLIC HEARING**

Zoning Map     Aerial Map     Comp. Plan Map     Vicinity Map



## CONDITIONAL USE PERMIT APPLICATION COUNTY OF GOOCHLAND, VIRGINIA

Planning and Zoning Office  
P.O. Box 103

**Goochland, VA 22063**

Phone: (804) 556-5863

Web: [www.co.goochland.va.us](http://www.co.goochland.va.us)

FAX: (804) 556-5654

### Office Use Only

Application File Date:	Fee paid: \$	Application No.: CU-
Planning Commission Public Hearing: _____ Board of Supervisors Public Hearing: _____	Receipt No.:	Pre-Application:

Name of Applicant:	Name of Representative:		
Address	Address		
Phone No. _____	Phone No. _____		
Location: _____	District: _____		
	Subdivision: _____		
Disclosure of Real Parties in Interest. Provide completed disclosure form(s).	Are there any deed Restriction? Yes ___ No If yes, attach a copy of deed restrictions		
<b>Property Owner</b>			
Tax Map #	GPIN #		
Deed Book	Plat Book	Zone	Acreage

Property in Land Use: Yes / No - If your property is in the County's land use taxation program, please be advised that any proposed change in the use of the land could make the property ineligible for further participation in the land use taxation program.

**REQUEST**

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The applicant requests a permit to locate the following USE on the above described property:  
\_\_\_\_\_ Article \_\_\_\_\_ Section \_\_\_\_\_. (Describe here what is intended to be done on or with the property. If a building is involved, a sketch or plan with photographic or other suitable description should accompany this application.)

**IMPROVEMENTS PROPOSED:**

Describe briefly the improvements proposed. State whether new buildings are to be constructed, existing buildings are to be used or additions made to existing building(s).

**NECESSITY OF USE:**

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Describe the reason for the requested change.

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**PROTECTION TO ABUTTING PROPERTY:**

Describe the effects of the proposed use on adjacent property and the surrounding neighborhood. What protection will be offered adjoining property owners?

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**ENHANCEMENT OF COUNTY:**

Why does the applicant believe that this requested change will be advantageous to the County? (Please substantiate with facts.)

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**DESCRIBE THE PROPOSED USE, AND OTHER PERTINENT DATA:**

1. Type of operation(s): \_\_\_\_\_
2. Hours of operation: \_\_\_\_\_
3. Proposed Name of development or business: \_\_\_\_\_
4. Estimated number of patrons/clients/patients/pupils/etc.: \_\_\_\_\_
5. Proposed number of employees/attendants/teachers/etc. \_\_\_\_\_
6. Estimate of traffic impact of the proposed use, including the maximum expected trip generation and the distribution of such trips by mode and time of day.  
\_\_\_\_\_  
\_\_\_\_\_
7. Description of building façade and architecture of proposed new building or additions.  
\_\_\_\_\_  
\_\_\_\_\_
8. The square footage of the building: \_\_\_\_\_ Parking: \_\_\_\_\_
9. A listing, if known, of all hazardous or toxic substances, to be generated, utilized, stored, treated, and/or disposed of on site and size and contents of any existing or proposed storage tanks or containers: \_\_\_\_\_  
\_\_\_\_\_
10. Building Design: Provide **16 copies** of floor plans and elevations for the front, sides, and rear of any on-site structures proposed.

**PLAN**

Furnish plot plan showing boundaries and dimensions of property, width of abutting right-of-way, location and size of buildings on the site, roadways, walks, off-street parking and loading space, landscaping and the like. Architect's sketches showing elevations of proposed buildings and complete plans are desirable and should be filed with application.

**REMARKS**

**Requirements and Instruction for Filing  
Application for Conditional Use Permit**

The following must be filled out completely and submitted by the applicant:

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1. The Application Form must be filled out completely with full answers to every statement and question. The application may be signed by an agent or attorney or by the lessee, owners before a Notary Public in the space provided on Page 4. Signatures of adjacent property owners who approve the request may be signed in the space provided on Page 5. If space is not sufficient, a supplemental sheet may be added to the petition. Such signatures are desirable, but are not required.

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  2. Furnish a Site Plan as spelled out in the Plan of Development Section of the Zoning Ordinance (Refer to Article 18, Section 18.3). **See attached**

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  3. The Application Fee required by Section 15.1-431 Code of Virginia (1950, as amended) is **\$4,500.00**. **This fee must be paid at the time of filing the application.** This fee only partially covers the extra cost to the County of investigating and processing the application through its various stages. Makes check payable to County of Goochland.

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  4. Photographs of the property involved not over 8 ½ by 11 inches but of adequate size to illustrate the condition of the property under discussion are always helpful and are suggested as exhibits with this application.

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  5. **Building permit** may be required; the applicant needs to contact the Building Inspection Office (804/556-5305).
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We the undersigned OWNERS OF ADJACENT PROPERTY hereby certify that we read the foregoing petition and agree that the facts stated correctly and completely present the conditions surrounding the property involved in this Application and believe the Application SHOULD BE GRANTED. (Add additional sheets where necessary. These signatures are desirable, but not demanded).

Name

Address

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STATE OF VIRGINIA )

~~COUNTY OF GOOCHLAND~~) To wit \_\_\_\_\_

I \_\_\_\_\_, being duly sworn, depose and say that I am the

Lessee/Owner of the property involved in the application. If I am not the Lessee/Owner, I will produce a copy of a contract to purchase the property or I will present written certification from the owner granting me the right to submit this application. I further declare that I have familiarized myself with the rules and regulations pertaining to preparing and filing this application and that the foregoing statements and answers provided herein are in all respects true and correct to the best of my knowledge and belief.

I have read this application, understand its intent, and freely consent to its filing. Furthermore, I have the power to authorize and hereby grant permission to Goochland County officials and other authorized government agents on official business to enter the property as necessary to process this application. I hereby agree to have a sign placed on my property, notifying the public of my application.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Phone No. \_\_\_\_\_

\_\_\_\_\_  
Mailing Address of Applicant

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
My Commission Expires

\_\_\_\_\_  
Notary Public

**Required if the Property Owner is not the Applicant**

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Date

Phone No. \_\_\_\_\_

\_\_\_\_\_  
Mailing Address of Property Owner

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
My Commission Expires

\_\_\_\_\_  
Notary Public

**GOOCHLAND COUNTY  
FEES FOR DEVELOPMENT REVIEWS**

## **REZONING**

Agricultural** (A-1, A-2, F-C)	\$ 450.00 per application
Residential** (R-1, R-2 and R-3) (R-R, R-MHS and R-MPH) (R-O and RPUD)	\$1,500.00 per application, Plus 50.00 per acre for each acre
Commercial* (B-1 and B-2)	\$1,500.00 per application, Plus 50.00 per acre for each acre
Industrial** (M-1 and M-2)	\$1,500.00 per application, Plus 50.00 per acre for each acre
Revising or Amending Proffers	\$1,125.00 per application
Comprehensive Plan Amendment	\$1,500.00 per application
Zoning or Subdivision Text Ordinance Amendment	\$750.00 per application

<b><u>CONDITIONAL USE PERMITS</u></b>	\$ 750.00
<b>Wireless Communication Tower</b>	<b>\$4,500.00</b>

<b><u>VARIANCES/APPEALS</u></b>	\$ 450.00
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<b><u>CERTIFICATE OF APPROVAL (COA)</u></b>	
Project value less than \$5,000	\$250.00
Project value between \$5,000 and \$10,000	\$500.00
Project value over \$10,000	\$750.00

## **SUBDIVISION REVIEWS**

### **Major Subdivisions**

1. Tentative Plat	\$750.00 plus \$25.00 per lot
2. Final Plat	\$600.00 plus \$20.00 per lot
3. Right-of-way Vacation	\$300.00
4. Vacation of Plat	\$ 225.00

### **Minor Subdivisions**

1. Plats Officer Review	\$ 600.00 plus \$25.00 per lot
2. Vacation of lot line	\$75.00

\*Each acre, or portion thereof

**\*\*A \$750.00 FEE WILL BE IMPOSED ON ANY APPLICANT WHO REQUESTS A DEFERRAL OF A PUBLIC HEARING FOR A REZONING CASE ONCE THE CASE HAS BEEN ADVERTISED.**