

MADISON COUNTY BUILDING & ZONING DEPARTMENT

410 N Main Street, Madison, VA 22727

Phone: (540) 948-6102

www.madisonco.virginia.gov

REZONING PERMIT APPLICATION INSTRUCTIONS

IT IS THE RESPONSIBILITY OF THE APPLICANT TO COMPLETE THIS PACKET IN ITS ENTIRETY AND AS PRECISELY AS POSSIBLE.

This packet is considered complete when the following have been received:

- ☐ Rezoning Application (attached).
- ☐ A \$600.00 non-refundable fee is due when this application is submitted to our office.
Plus: Minimum charge of >10 acres: Add \$100.00 per acre over 10
- ☐ A narrative describing the purpose of the project.
- ☐ A survey plat of the property and/or a conceptional site plan must be submitted with this application. On the plat or plan, you must identify the location of any proposed or existing structures and/or buildings (including measurements to all property lines), any existing or proposed roads/rights-of-way/easements, location of entrance to the property, proposed parking, proposed signs, and any proposed fencing, buffering, and/or landscaping.
- ☐ A copy of the current paid real estate tax receipt for the property (may be obtained from the Madison County Treasurer's Office).
- ☐ You may be required to provide a copy of the deed to the property if staff cannot locate it in the clerk's office.
- ☐ Staff must have written comments from the following departments/agencies on the special use permit request prior to the scheduling of the public hearing. Also, staff may work with you on obtaining all comments except for the Property Owners Association which is the responsibility of the owner/applicant:
 - The Madison County Health Department
 - The Virginia Department of Transportation
 - The Madison County Building Official
 - The Property Owners Association- President, Vice President, or Secretary (*if in a subdivision*)
- ☐ Any other exhibits to support this request to be reviewed by the Planning Commission and Board of Supervisors should be submitted along with this application.

If you have any questions, please call the Madison County Building and Zoning Office at (540) 948-6102, Monday through Friday, 8:30 a.m. to 4:30 p.m.

*****ADDITIONAL INFORMATION MAY BE REQUIRED IF THE PLANNING & ZONING ADMINISTRATOR DETERMINES IT NECESSARY TO ENSURE CONFORMANCE AND TO PROVIDE ENFORCEMENT OF THE ORDINANCE(S). *****

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REZONING APPLICATION

- 1) The applicant is the: ☐Owner ☐Lessee ☐Agent for Owner

| Owner | Lessee or Agent for Owner (if applicable) |
|------------------|---|
| Name: | Name: |
| Mailing Address: | Mailing Address: |
| | |
| Phone Number: | Phone Number: |
| Email: | Email: |

- 2) E911 Address of Construction: _____

- 3) Please provide detailed directions to the site: _____

- 4) Tax Map Number: _____ 5) Size of Property: _____

- 6) Is the parcel located in a subdivision? ☐Yes ☐No
If yes, which one: _____

- 7) Is the parcel located in the floodplain? ☐Yes ☐No

- 8) If applicable, is the proposed structure and/or building located in the floodplain? ☐Yes ☐No

- 9) Water and sewage disposal source for the property:
☐Private Well ☐Private Septic ☐Public Water ☐Public Sewer ☐None

- 10) Please check which zoning district the parcel is located (If unknown, office staff can look this up for you):

- | | |
|---|---|
| <input type="checkbox"/> Conservation (C-1) | <input type="checkbox"/> Agricultural (A-1) |
| <input type="checkbox"/> Residential, Limited (R-1) | <input type="checkbox"/> Residential, General (R-2) |
| <input type="checkbox"/> Residential, Multiple Family (R-3) | <input type="checkbox"/> Business, General (B-1) |
| <input type="checkbox"/> Industrial, Limited (M-1) | <input type="checkbox"/> Industrial, General (M-2) |

- 11) Current use of property (Ex: Vacant, Residence, Farming, etc.): _____

- 12) List existing structures and/or buildings that are currently on the property:

- 13) It is requested that the property be rezoned from _____ to _____.

- 14) If rezoned, it is proposed that the property will be put to the following use:

[illegible]

Please list all names and mailing addresses of all adjoining landowners, including landowners across any road or right-of-way. Names and addresses of owners may be found on the Madison County website (www.madisonco.virginia.gov) under the GIS link.

Name

Mailing Address

[illegible][illegible]

Adjoining Property Owner Verification

As applicant for this rezoning request, I (we), _____ hereby acknowledge that I (we) have faithfully and correctly provided names and complete mailing addresses of all my adjoining property owners and those directly across the road or right-of-way. I understand that that failure to provide all adjoining property owners will leave me liable for additional cost for re-advertisement and notices mailed, and that my request may be delayed until proper notification has been given to all adjoining property owners and those property owners across the road or right-of-way.

Signature of Owner

Date

Signature of Lessee and/or Agent for Owner

Date _____

OFFICE USE ONLY- REZONING APPLICATION

Date application received: _____

Amount Paid: _____ Payment Type: _____ Payment Date: _____

Staff Initials: _____

Date application considered complete (after department/agency comments received): _____

Date of public hearing: _____

Dates public hearing was advertised: _____

Date adjoining landowners were notified: _____

Date of hearing notice to applicant: _____