

**MADISON COUNTY BUILDING & ZONING DEPARTMENT**  
**410 N Main Street, Madison, VA 22727**  
**Phone: (540) 948-6102**  
**www.madisonco.virginia.gov**

**ZONING TEXT AMENDMENT APPLICATION INSTRUCTIONS**

- 1) The zoning text amendment application fee, as described in the Madison County Building & Zoning Fee Schedule, is due when this application is submitted to our office.  
**Current Fee: \$400**
- 2) A written narrative is required from the applicant describing the rationale for the proposed new ordinance, change of the existing ordinance, or removal of an existing ordinance.
- 3) This application will be scheduled by the Planning and Zoning Administrator to go before the Madison County Planning Commission for a minimum of two workshops. This application will also be scheduled for a public hearing in a joint meeting with the Madison County Planning Commission and the Madison County Board of Supervisors. Attendance by the applicant, or the applicant's designated agent, is required at all workshops and the public hearing.
- 4) If you have any questions, please call our office at (540) 948-6102, Monday through Friday, 8:30 a.m. to 4:30 p.m.

**ZONING TEXT AMENDMENT APPLICATION**

|                  |
|------------------|
| Name:            |
| Mailing Address: |
|                  |
|                  |
| Phone Number:    |
| Email:           |

- ☐ I am proposing a new zoning ordinance
- ☐ I am proposing modifying an existing zoning ordinance
- ☐ I am proposing the removal of a zoning ordinance
  
- ☐ I have attached my written narrative as required in application instruction 2.

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

\_\_\_\_\_  
Date

**OFFICE USE ONLY:**

Date Application Received: \_\_\_\_\_ Staff initials: \_\_\_\_\_ Application Fee: \_\_\_\_\_

Date of First Planning Commission Workshop: \_\_\_\_\_

Date of Second Planning Commission Workshop: \_\_\_\_\_

Date of Public Hearing: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Planning Commission Action

☐ Recommend Approval    ☐ Recommend Denial    Date: \_\_\_\_\_

Board of Supervisors' Action

☐ Approved    ☐ Denied    Date: \_\_\_\_\_