

AN OVERVIEW OF THE APPLICATION PROCESS

**Town Manager
Town of Warsaw
78 BELLEVILLE LANE
P. O. BOX 730
WARSAW, VIRGINIA 22572
PHONE: (804) 333-3737
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Email: jslusser@town.warsaw.va.us**

PURPOSE OF THE LAND DEVELOPMENT ORDINANCE

The Land Development Ordinance is adopted for the purpose of guiding development in accordance with the existing and future needs of the Town of Warsaw in order to improve public health, safety, convenience and welfare of its citizens. This Ordinance is designed to plan for the future development of the Town so significant environmental, cultural and other features which contribute to the quality of life and character of the Town of Warsaw identified and protected; transportation systems are carefully planned; new community centers are developed with adequate highway, utility, health, educational, and recreational facilities; the needs of industry and business sector; residential areas are provided with healthy surroundings for family life; significant natural lands are preserved; and the growth of the community is consonant with the efficient and economical use of public funds.

THE TOWN MANAGER WILL HELP YOU

The Town Manager shall be responsible for coordination of the development review and decision-making process. His responsibilities include:

Administering and enforcing all provisions of this Ordinance, including serving as Subdivision Agent and Zoning Administrator.

Reviewing every application with the applicant for completeness and compliance with the provisions of this Ordinance.

Determining which decision-making procedure (DMP) is specified by Ordinance as the appropriate decision-making process, and facilitating the process of every application.

Notifying the applicant by written notice of an approval, approval with conditions, or denial within ten (10) days of final action.

DECISION-MAKING PATHS (DMPs)

There are 4 different ways that an application can be processed, depending upon the request:

1. DMP-A Applications can be approved by the Town
Manager.
2. DMP-B Application can be approved by Town Council
after a public hearing.
3. DMP-C Application can be approved by Town Council
without a public hearing.
4. DMP-D Application can be approved by the Board of
Zoning Appeals after a public hearing

CONDITIONAL USE PERMIT

TOWN OF WARSAW
78 BELLEVILLE LANE
P O BOX 730
WARSAW, VA 22572

TELEPHONE: 804-333-3737

FAX: 803-333-3104

APPLICATION FEE: \$ 200.00

DATE RECEIVED AND/OR REVIEWED BY WARSAW PLANNING COMMISSION: _____

XX

APPLICANT NAME: _____ ADDRESS: _____

The undersigned owner(s) of the following described property hereby applied for a conditional use permit to:

on Parcel _____ at _____ (# & Street Address), Zoned _____,

as required by Article _____ Section _____ of the Development Management Ordinance.

Five copies of the engineers/developers plans are to be submitted with the filing of this application.

1. Description of Property: _____

2. Subdivision _____ Lot # _____ Acreage _____ Lot Size _____

A plat of survey is hereby attached: Yes _____ No _____

3. Are entrances to the property from a state maintained road? Yes _____ No _____

If yes, give name of street: _____

4. Is water and sewer available to the property? Yes _____ No _____

if no, what arrangements have been made to supply water and sewer? _____

5. What are the proposed hours of operation(if business)? From _____ am/pm To _____ am/pm.

6. Name and address of adjacent property owners:

Name: _____ Address: _____

Name: _____ Address: _____

Name: _____ Address: _____

Name: _____ Address: _____

Owner's Signature: _____ Telephone Number: _____

Developer's Signature: _____ Telephone Number _____

Action Taken by Planning Commission: Recommend to Approve: _____ Recommend to Deny: _____

By: _____ Date Action Taken: _____

Signature of Warsaw Planning Commission Chairman

SEE THE ATTACHED FOR CONDITIONS AND RECOMMENDATIONS SET ON THIS APPLICANT.

CONDITIONS AND RECOMMENDATIONS
CONDITIONAL USE PERMIT
SPECIAL CONDITIONS

According to Section 3-10-3 of the Development Management Ordinance, The following Conditions and Recommendations shall be required as noted below. This will assure that the approved use will not be detrimental to the character and development of the adjacent properties and will be in accordance with this ordinance.

APPLICANT'S NAME _____ DATE: _____

1. More restrictive sign standards: _____

2. Additional open space, buffering requirements: _____

3. Additional yard requirements: _____

4. Special lighting requirements: _____

5. Limitation on hours of operation: _____

6. Additional off-street parking and loading requirements: _____

7. Abating or restricting noise, smoke, dust or other elements that may affect surrounding properties: _____

8. Improvements to improve traffic congestion: _____

This permit will expire on _____, 2004, if the work has not begun by that time.

I, _____, have read and understand that approval of my conditional use permit application will be revoked if I do not conform to the above conditions and recommendations.

By: _____ Date: _____
Applicant/Owner's Signature

Warsaw Town Council Action Taken: Approved _____ Denied: _____ Date: _____

By: _____ Date: _____
Town Manager/Designee Signature

APPLICATION FOR ZONING VARIANCE
TOWN OF WARSAW
78 BELLEVILLE LANE
P.O. BOX 730
WARSAW, VIRGINIA 22572

Date of Application: _____

Application Fee: \$200.00

TOWN OF WARSAW BOARD OF ZONING APPEALS

The applicant must provide the following information to support this application:

A plat of the property drawn to scale showing dimensions.

A location sketch of the property showing nearest road intersection.

Why is the variance being requested?

List the names and addresses of owners or occupants of all adjacent property or property across a road, highway, or railroad right-of-way,

Name	Mailing Address
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

The undersigned applicant declares that the above statements and those contained in any exhibits transmitted to the Town of Warsaw Board of Zoning Appeals are true.

Applicant Name: _____

Signature: _____

Mailing Address: _____

_____, _____, _____

Telephone Number: _____

DATE:
VIRGINIA

TOWN OF WARSAW

APPLICATION #

SUPPLEMENTAL APPLICATION FORM B

ASSESSORS
PARCEL #: _____

:

APPLICANT:

SUBDIVISION/SITE PLAN DATA SHEET

GENERAL DATA:

PLAT/PLAN TITLE: _____

PREPARED
BY: _____
(Firm Name)
Address: _____

NAME OF CONTACT PERSON: _____ PHONE#: _____
PLAT/PLAN DATE OF PREPARATION:

PUBLIC WATER & SEWER PROPOSED:

*

SIZE OF PARCEL:

<u>SUBDIVISION</u>	<u>SITE PLAN</u>
NUMBER OF PROPOSED LOTS: _____	USE(S) PROPOSED: _____
LENGTH OF PROPOSED PUBLIC _____	ROADS: _____
MINIMUM LOT SIZE: _____	TOTAL SQUARE FEET OF FLOOR AREA BY USE (IF RESIDENTIAL, TOTAL NO. DWELLING UNITS: _____)
MINIMUM REQUIRED LOT SIZE: _____	NO. OF PROPOSED PARKING SPACES: _____
	NO. OF REQUIRED PARKING SPACES: _____

SUPPLEMENTAL APPLICATION FORM C

DATE:

TOWN OF WARSAW
VIRGINIA

APPLICATION #

ASSESSORS
APPLICANT:
PARCEL #:

WAIVER OF CHECKLIST SUBMISSION

Please list below those application plan submission requirements for which you are requesting a waiver.

Checklist Submission
#

Reason for Proposed Absence
of Plan Submission Details/Documents

Checklist Submission #	Reason for Proposed Absence of Plan Submission Details/Documents

SUPPLEMENTAL APPLICATION FORM D

DATE: _____	TOWN OF WARSAW VIRGINIA	APPLICATION # _____
ASSESSORS _____		APPLICANT: _____
PARCEL#: _____		_____

WAIVER OF DESIGN REQUIREMENTS

Please list below the design standards of the Development Management Ordinance from which you are requesting a waiver.

Ordinance Section #	Design Requirement	Reason for Waiver Request
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
COMMENTS:		