Application Procedures
Conditional Change of Zoning

1. A pre-application meeting is required. Call 664-4752 for an appointment.
2. Contact the appropriate Civic League. Attendance at a Civic League meeting or a public meeting as organized by the applicant is required as part of a complete submission.
3. Meet with the Departments of Public Works, and Recreation Parks and Open space for site recommendations prior to submittal of application.
4. Submit completed application with all required attachments including:
   • Fee: $1,375 check for required application fee made payable to the City of Norfolk (non-refundable). If a planNorfolk2030 amendment is required, an additional processing fee of $15 will be charged.
   • Physical Survey: 8½ x 11-inch or 11 x 17-inch copy of a physical survey, drawn to scale and showing site conditions including existing structures, driveways, parking, property lines, and landscaping (see attached example).
   • Conceptual Site Plan: 8 ½ x 11-inch or 11 x 17-inch copy of a conceptual site plan drawn to scale and showing:
     o All proposed site improvements
     o Proposed structures
     o Drive aisles and parking with dimensions
     o Proposed changes to parcel/property lines (including lease lines)
     o All recommendations of Department of Public Works and Recreation Parks and Open Space.
   • Proffered conditions: List of conditions proffered by applicant.
   • Taxes: Proof that all City taxes are current.
   • Civic League: Letter from Civic League or summary of public meeting.
   • Deliver to:
     o Department of Planning
       810 Union Street, Room 508
       Norfolk, Virginia 23510

5. Provide a brief description of the request (what is the purpose of the rezoning).
6. Staff will review application to determine completeness.
7. Staff will conduct a site visit to post notice and photograph property (Applicant does not need to be present.)
8. Staff will advertise legal notice of application request in Virginian Pilot.
9. The Planning Commission will visit the site on the 2nd Wednesday of the month. (Applicant does not need to be present).
10. Applicant **must** attend public hearing:
   - Where: City Hall Building
     11th Floor, Council Chambers
   - Time: 2:15 p.m.

11. During the Commission’s hearing:
   Applicant must register to speak prior to the 2:30 hearing start time.
   - Staff will present application and recommendation with conditions.
   - Applicant/representative may make a presentation.
   - Proponents may speak.
   - Opponents may speak.
   - Time will be provided for rebuttal.

12. The Planning Commission will make a recommendation on the application at the hearing which is forwarded to City Council.

13. The item will be considered by City Council on the 4th Tuesday of the following month. The applicant must be present.
   - Where: City Hall Building
     11th Floor, Council Chambers
   - Time: 7:00 p.m.
Application
Conditional Change of Zoning

Date: ______________________

Change of Zoning:
From: _______ Zoning       To: Conditional _______ Zoning

DESCRIPTION OF PROPERTY

Address: ___________________________________________________________________

Existing Use of Property: ______________________________________________________

Proposed Use: ______________________________________________________________

Current Building Square Footage: _______ Proposed Building Square Footage: _______

Trade Name of Business (If applicable): __________________________________________

APPLICANT*

1. Name of applicant: (Last) _______________________ (First) ____________________(MI) _____
Mailing address of applicant (Street/P.O. Box): __________________________________________
(City): __________________________ (State): __________ (Zip Code): _______________
Daytime telephone number of applicant: (     ) _______________E-mail address: __________________________________

AUTHORIZED AGENT* (if applicable)

2. Name of applicant: (Last) _______________________ (First) ____________________(MI) _____
Mailing address of applicant (Street/P.O. Box): __________________________________________
(City): __________________________ (State): __________ (Zip Code): _______________
Daytime telephone number of applicant: (     ) _______________Fax: (     ) ___________
E-mail address: ___________________________
PROPERTY OWNER*

3. Name of property owner: (Last) __________________ (First) ____________ (MI) ______

Mailing address of property owner (Street/P.O. box): ________________________________

(City): ___________________ (State): ____________ (Zip Code): _________________

Daytime telephone number of owner: (________) __________________

E-mail address: _____________________

*(If applicant/agent/property owner is a LLC or a Corp./Inc., include name of official representative and/or all partners)

CIVIC LEAGUE INFORMATION

Civic League contact: _____________________________________________________________

Date meeting attended/held: ______________________________________________________

Ward/Super Ward information: __________________________________________________

CERTIFICATION

I hereby submit this complete application and certify the information contained herein is true and accurate to the best of my knowledge:

Print name: ___________________________ Sign: ___________________________ ___________

(Property Owner) (Date)

Print name: ___________________________ Sign: ___________________________ ___________

(Applicant) (Date)

(If Applicable)

Print name: ___________________________ Sign: ___________________________ ___________

(Authorized Agent Signature) (Date)
PROFERRED CONDITIONS

1) ____________________________________________________________

2) ____________________________________________________________

3) ____________________________________________________________

4) ____________________________________________________________

5) ____________________________________________________________

*I hereby affirm that the proffered conditions are reasonable and appropriate:

Print name: ___________________ Sign: ___________________ (Date)
(Property Owner)

Print name: ___________________ Sign: ___________________ (Date)
(Applicant)

(If Applicable)

Print name: ___________________ Sign: ___________________ (Date)
(Authorized Agent Signature)
EXAMPLE

Site Plan

THIS IS TO CERTIFY THAT I, ON NOV. 19, 2007, SURVEYED THE PROPERTY SHOWN HEREBON AND THAT THE TITLE LINES AND PHYSICAL IMPROVEMENTS ARE AS SHOWN HEREBON. THE IMPROVEMENTS STAND STRICTLY WITHIN THE TITLE LINES AND THERE ARE NO ENCROACHMENTS OF OTHER BUILDINGS EXCEPT AS SHOWN.

SIGNED:

NOTES:
1) THE PROPERTY SHOWN HEREBON APPEARS TO BE IN "C" FLOOD ZONE ACCORDING TO F.E.M.A. MAP PANEL NO. 51014--00100, REVISED APR. 17, 1984.
2) THIS SURVEY WAS PERFORMED WITHOUT THE BENEFIT OF A TITLE REPORT, AND MAY NOT SHOW ANY/EASEMENTS AFFECTING THE PROPERTY.
EXAMPLE

Conceptual Site Plan
(required for new construction or site improvements)
## Checklist

### Conditional Change of Zoning

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
<th>Not Applicable (Staff to fill-out)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required application fee, $1,375.00</td>
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<tr>
<td>Pre-application meeting with Zoning Staff (At least 3 business days prior to deadline)</td>
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<tr>
<td>Has this proposal been coordinated with the appropriate Civic League(s) or a public meeting held?</td>
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<tr>
<td>Has this application been coordinated with the Transportation Division of Public Works (757) 664-7300?</td>
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<tr>
<td>Has this application been coordinated with Recreation, Parks and Open Space (757)-441-2400?</td>
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<tr>
<td>One 8½ x 14 inch or 11 x 17-inch scaled copy of a physical survey</td>
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<tr>
<td>One 8½ x 14 inch or 11 x 17-inch scaled copy of a conceptual site plan</td>
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<tr>
<td>Signature of all property owners?</td>
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<tr>
<td>Is property in an AICUZ? Clear zone/Accident Potential Zone (APZ)/Noise zone</td>
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<td>Is property within ½ mile of another locality, or 3,000 feet of a military installation?</td>
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<td>Proof of all City Taxes paid?</td>
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</table>

Applicant Signature: ___________________________ Date: ________________

Staff Signature: ___________________________ Date: ________________

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DEPARTMENT OF CITY PLANNING
810 Union Street, Room 508
Norfolk, Virginia 23510
Telephone (757) 664-4752  Fax (757) 441-1569
(Revised July, 2019)