



Application Procedures

Change of Zoning

1. **A pre-application meeting is required.** Call (757)664-4752 for an appointment.
2. Contact the appropriate Civic League. Attendance at a Civic League meeting or a neighborhood meeting as organized by the applicant is required as part of a complete submission.
3. Submit completed application with all required attachments including:
 - **Fee:** **\$1,375** check for required application fee made payable to the City of Norfolk. If a *plaNorfolk2030* 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:
 - All proposed site improvements
 - Proposed structures
 - Drive aisles and parking with dimensions
 - Proposed changes to parcel/property lines (including lease lines)
 - **Taxes:** Proof that all City taxes are current.
 - **Civic League:** Letter from Civic League or summary of neighborhood meeting.
 - **Deliver to:**
 - Department of Planning
810 Union Street, Room 508
Norfolk, Virginia 23510
4. Provide a brief description of the request (what is the purpose of the rezoning).
5. Staff will review application to determine completeness.
6. Staff will conduct a site visit to post notice and photograph property (Applicant does not need to be present.)
7. Staff will advertise legal notice of application request in *Virginian Pilot*.
8. The Planning Commission will visit the site on the 2nd Wednesday of the month. (Applicant does not need to be present).

DEPARTMENT OF CITY PLANNING
810 Union Street, Room 508
Norfolk, Virginia 23510
Telephone (757) 664-4752 Fax (757) 441-1569
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9. 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.

14. You must contact the City Clerks office at (757)-664-4253 or at council@norfolk.gov.

- Where: City Hall Building
11th Floor, Council Chambers
- Time: 6:00 p.m.

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810 Union Street, Room 508

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Application Change of Zoning

Date: _____

Change of Zoning:

From: _____ Zoning To: _____ Zoning

DESCRIPTION OF PROPERTY

Address: _____

Existing Use of Property: _____

Proposed Use: _____

Current Building Square Footage: _____ Proposed Building Square Footage: _____

Name of Business (If applicable): _____

APPLICANT*

1. Name of applicant: _____

Mailing address of applicant (Street/P.O. Box): _____

(City): _____ (State): _____ (Zip Code): _____

Daytime telephone number of applicant: _____

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: _____

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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: _____

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

CIVIC LEAGUE & BUSINESS ASSOCIATION INFORMATION

Civic League contact: _____

Date meeting attended/held: _____

Local Business Association 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)

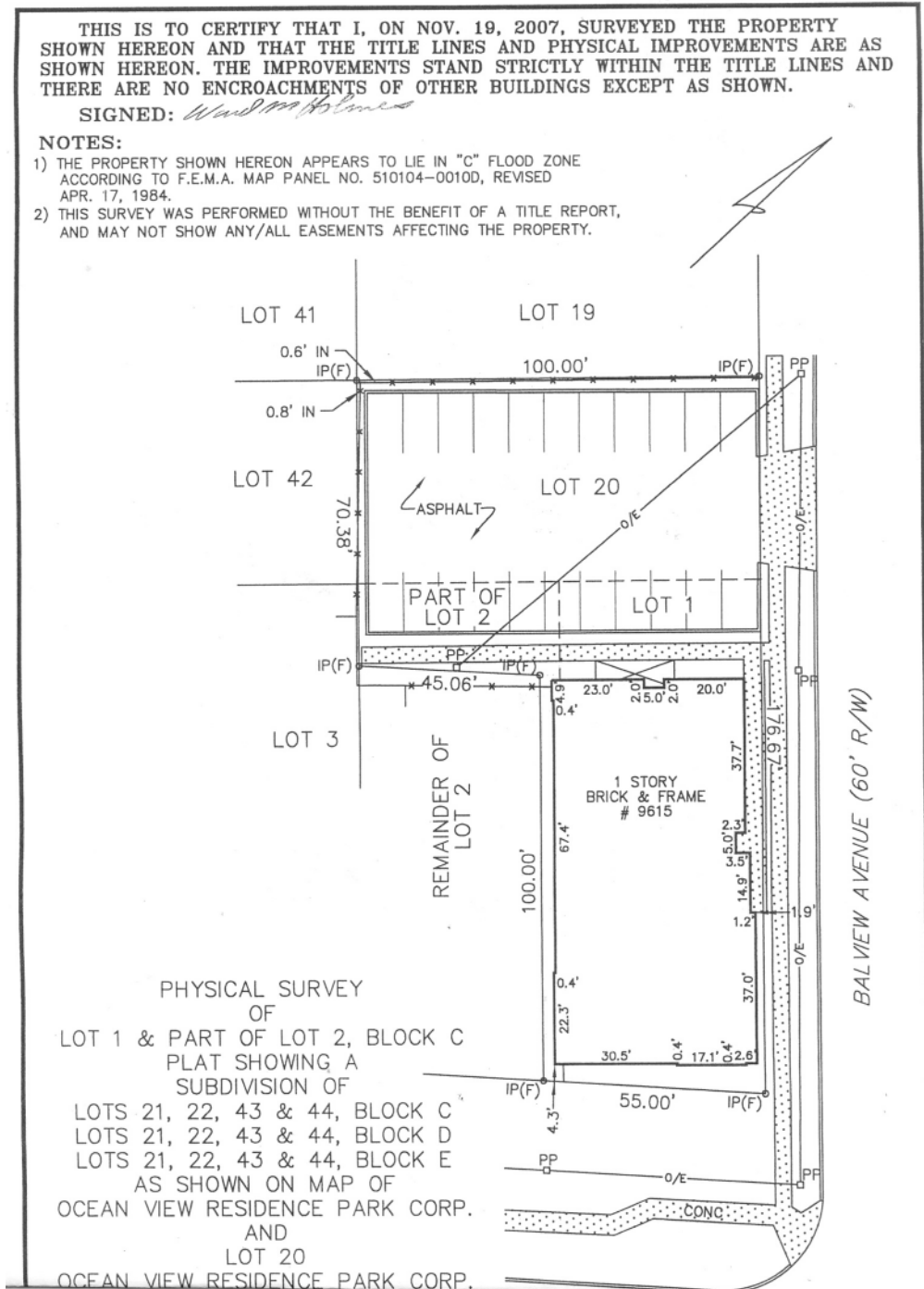
Print name: _____ Sign: _____
(Applicant) (Date)

(If Applicable)

Print name: _____ Sign: _____
(Authorized Agent Signature) (Date)

EXAMPLE

Site Plan



DEPARTMENT OF CITY PLANNING

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Checklist Change of Zoning

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

Applicant Signature: _____ Date: _____

Staff Signature: _____ Date: _____

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