Application Procedures

Development Certificate

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 Transit, and Recreation Parks and Open space for site recommendations prior to submittal of application.
4. Submit completed application with all required attachments including:
   - **Fee:** $95 check for required application fee made payable to the City of Norfolk. **If waivers are requested,** additional analysis will be needed; which will require a fee of **$435**.
   - **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:** 8½ 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)
     - All recommendations of Department of Transit and Recreation Parks and Open Space.
   - **Elevations:** Building elevations prepared by a design professional including list of materials.
   - **Taxes:** Proof that all City taxes are current.
   - **Civic League:** Letter from Civic League or summary of public meeting.
   - **Deliver to:**
     - Department of Planning
     810 Union Street, Room 508
     Norfolk, Virginia 23510
5. Provide a brief description of the business (i.e., # of employees, current locations, type of restaurant, etc...).
6. Staff will review application to determine completeness.
7. Staff will conduct a site visit and photograph property (Applicant does not need to be present.)
8. The item will be reviewed by the Architectural Review Board (“ARB”) which meets the 2nd and 4th Monday of every month.
9. Applicant **must** attend meeting:

- Where: City Hall Building  
  10th Floor, Council Chambers
- Time: 4:00 p.m.

10. During the ARB meeting:

- Applicant will present application
- ARB members may ask questions
- ARB will make a recommendation to the City Planning Commission:
  - The request will be approved as presented, approved with conditions, continued to allow the applicant to provide more information, or denied.

11. The item will be considered by City Planning Commission on the 2\textsuperscript{nd} or 4\textsuperscript{th} Thursday of each month. The applicant should be present.

- Where: City Hall Building  
  10th Floor, Council Chambers
- Time: 1:00 p.m.
Date: ______________

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: (   ) _______________ Fax: (   ) _______________

   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)
CRITERIA FOR REVIEW
A Development Certificate shall be approved if the Planning Commission finds that all of the following standards are met:

(a) The development proposed with the minor modification is compatible with surrounding land uses.
_____________________________________________________________________________
_____________________________________________________________________________

(b) The development proposed is consistent with the comprehensive plan.
_____________________________________________________________________________
_____________________________________________________________________________

(c) The uses proposed are allowed in the base and overlay districts where the development is located.
_____________________________________________________________________________
_____________________________________________________________________________

(d) The modifications in development standards requested in the development certificate do not exceed those established in for the applicable zoning district.
_____________________________________________________________________________
_____________________________________________________________________________

(e) Any modifications are the absolute minimum necessary to accommodate the development proposal.
_____________________________________________________________________________
_____________________________________________________________________________

(f) The proposed development complies with all applicable proffers and conditions applicable to the land.
_____________________________________________________________________________
_____________________________________________________________________________
Additionally, please include a summary of how the proposed development will meet the development standards of the applicable zoning district:


2) The IN-C: Institutional - Campus zoning district;

3) The EBH: East Beach Harbor zoning district;

4) The G-1: Granby/Monticello Corridor Mixed Use zoning district; and

### Checklist

**Development Certificate**

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
<th>Not Applicable</th>
<th>Comments</th>
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<tbody>
<tr>
<td>Required application fee, <strong>$95 or $435</strong></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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<td>Has this proposal been coordinated with the appropriate Civic League(s) or a public meeting held?</td>
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<td>Has this application been coordinated with the Department of Transit? (757) 664-7300</td>
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<td>Has this application been coordinated with Recreation, Parks and Open Space (757)-441-2400?</td>
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<td>One 8½ x 14 inch or 11 x 17-inch scaled copy of a physical survey</td>
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<td>Building elevations and materials</td>
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<td>Signature of all property owners?</td>
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<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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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, 2018)