



## **Application Procedures** **Zoning Ordinance Text Amendment**

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: \$915** check for required application fee made payable to the City of Norfolk (non-refundable). 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)
    - All recommendations of Department of Transit and Recreation Parks and Open Space.
  - **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 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).

## Application Procedures

### Change of Zoning

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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 4<sup>th</sup> Tuesday of the following month. The applicant must be present.

- Where: City Hall Building  
11th Floor, Council Chambers
- Time: 7:00 p.m.



**Application**  
**Zoning Ordinance Text Amendment**  
**(Please Print)**

Date: \_\_\_\_\_

**Zoning Ordinance Text Amendment**

Amend Section(s) \_\_\_\_\_ Add New Section(s) \_\_\_\_\_

**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: \_\_\_\_\_

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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: ( ) \_\_\_\_\_

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)



**Checklist**  
**Zoning Ordinance Text Amendment**

Item	Yes	No	Not Applicable	Comments
Required application fee, <b>\$915</b>				
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?				
Proposed Text				
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: \_\_\_\_\_