TOWN OF BLACKSBURG
CHANGE OF ZONING CLASSIFICATION APPLICATION (REZONE)

This application and all accompanying information must be submitted in full before the Rezoning Request can be accepted by Town staff. Once the Planning and Building Department accepts the application, it will be referred to the Planning Commission and Town Council for consideration. The application and all accompanying information will become conditions of approval. Proffered conditions of approval are binding. Please contact the Planning and Building Department at (540) 961-1126 for application deadline or questions, or to schedule the required pre-submittal meeting.

The following items MUST accompany this application for the Town of Blacksburg to accept this application for processing and review. Any items submitted cannot be larger than 11x17 in size:

1) Written, signed consent of the property owner. If the applicant is the contract purchaser, the written consent of the property owner is required
2) One copy of a site plan with surveyed boundaries for the property showing the lot, existing and proposed structures, site improvements, parking areas and spaces, and any other information necessary to determine the ability to meet the Zoning Ordinance site development standards, Use & Design standards and physical compatibility with the neighborhood
3) Building elevations for all proposed buildings -or- elevations showing any changes to existing buildings
4) Vicinity map (may be included on the site plan) showing surrounding uses, zoning districts, buildings and other improvements within 300’ of the property
5) Legal description of the property
6) Completed VDOT 527 (Traffic Impact Analysis) Form
7) A list of adjacent property owners (including properties across a street) and their addresses, plus the cost of CERTIFIED FIRST CLASS postage for notifying each adjacent property owner (no stamps, please)
8) Fee of $100 for the Town of Blacksburg to post all public hearing signs. Please note: The applicant may choose to post the property, using signs provided by Town Staff, and not be subject to the posting fee
9) Fee of $1500 for Rezoning, or $2000 for Planned Residential Rezoning, or $1000 for amendment to existing Planned Residential District. Please make your check or money order payable to the TOWN OF BLACKSBURG
10) Proof of pre-submittal meeting between Town staff and applicant/agent
11) Prior to the initiation of an application for Rezoning, or prior to the issuance of final approval, the applicant shall produce satisfactory evidence that any delinquent real estate taxes owed, which have been properly assessed against the subject property, have been paid (§ 1150)
12) Any applicant for a Rezoning shall make complete disclosure of the equitable ownership of the real estate to be affected including, in the case of corporate ownership, the names of stockholders, officers and directors, and in any case the names and addresses of all of the real parties of interest. The requirement of listing names of stockholders shall not apply to a corporation whose stock is traded on a national or local stock exchange, and which corporation has more than 500 shareholders (§ 1110)
13) Proffer statements that meet the requirements as stated below
14) Digital copies (PDF) of all application materials are required at the time of submittal, or within 10 working days of the submittal date.

SIGNATURE OF APPLICANT/CONTACT PERSON + PRINTED NAME:

_______________________________________________________  DATE:  ____________________
By signing this application, I affirm that this application is complete and all required items are included

SIGNATURE OF PROPERTY OWNER + PRINTED NAME:

_______________________________________________________  DATE:  ____________________
By signing this application, I affirm that this application is complete and all required items are included

REVISED 04-10-14 KJO
Location or Address of Property for Rezoning:

___________________________________________________________________________________

Tax Parcel Number(s): ______________________________________________________________

Acreage: ______________________________________________________________

Present Zoning District: _________________________________________________________

Proposed Zoning District: _______________________________________________________

Present Use of Property: _______________________________________________________

Proposed Use of Property: _____________________________________________________

Is this request for an amendment to an existing Conditional Zoning or Planned Residential District? ______

Previous Rezoning Ordinance Number________________________________________

APPLICANT/MAIN CONTACT PERSON (Contract Purchaser if applicable)

NAME: __________________________________________________________________________

ADDRESS: _______________________________________________________________________

____________________________________________________________

PHONE: _______________________________ EMAIL: _________________________________

PROPERTY OWNER(s) (If property is held in an LLC or other corporation, names of all partners must be disclosed. All

names of members or beneficiaries of a trust must also be disclosed. Signature blocks for multiple property owners

may be obtained on separate sheets if needed)

NAME: _______________________________________________________________________

ADDRESS: _____________________________________________________________________

________________________________________

PHONE: _______________________________ EMAIL: _________________________________

ENGINEER/ARCHITECT (optional)

NAME: _______________________________________________________________________

ADDRESS: _____________________________________________________________________

________________________________________

PHONE: _______________________________ EMAIL: _________________________________
DESCRIPTION OF REZONING REQUEST
Section 15.2-2286(A)(7) of the State Code of Virginia states that, "Whenever the public necessity, convenience, general welfare, or good zoning practice requires, the governing body may, by ordinance, amend, supplement, or change the regulations, district boundaries, or classifications of property. It is the applicant’s responsibility to provide a narrative outlining the following information in order to assess the public necessity, convenience, general welfare, or good zoning practice of the request (attach additional pages if necessary).

Need and justification for the change in zoning classification
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

Identify any anticipated effect of the proposed change on public services and facilities
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

Justify appropriateness of the property for the proposed changed, as it relates to the intent of the zoning district requested and applicable use and design standards for all proposed uses
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

Relationship of the proposed change to the Comprehensive Plan (Include FLU designation)
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

Way in which the proposed change will further the purposes of the Zoning Ordinance and general welfare of the community
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
PROOFFERED CONDITIONS
Potential proffers can be discussed as part of the presubmittal meeting, and should also be a part of the discussions with staff early in the review process.

PROOFFERED CONDITIONS, IF ANY, MUST:
   1) Be prepared by an attorney and be completed and accepted by the Town prior to the advertising for the Planning Commission Public Hearing;
   2) Have a reasonable relationship to the rezoning;
   3) Not include a cash contribution to the Town;
   4) Not include mandatory dedication of property; and
   5) Not include payment for construction of off-site improvements. The rezoning must give rise to the need for the conditions and the conditions must be related to the physical development or physical operation of the property and be in conformity with the Comprehensive Plan

Attach proffer statement with application.

OWNER CONSENT STATEMENT
I/We the owner(s)/applicant/contract purchaser(s) of the property described on this application do hereby apply for a change of zoning district classification described on this application.

I/We state that no application for a change in zoning district classification, substantially the same as this request, has been considered by the Town Council for the above-referenced property, or any part thereof, within one year prior to the date of this application.

SIGNATURE OF OWNER/APPLICANT

DATE