

Use Permit Application Form

www.portsmouthva.gov/planning/

801 Crawford Street, Portsmouth, Virginia 23704

 A pre-application conference is mandatory prior to submission of an application for a use permit. A use permit approval may be revoked by the City Council following a public hearing for failure to comply with the terms and conditions of the use permit application approval. 								
1. General Project Information								
Project A	Project Address:							
Tax Parcel Identification Number:								
Proposed Use:								
Existing Uses that will Remain:								
Proposed Hours of Operation:								
			2. Submittal Requirement Checklist					
(S			7 copies of listed items. Applicants seeking concurrent review of a type I or type II development plan it an application consistent with the application checklist for type I and type II development plans)					
			A. General Information					
	<u> </u>	plication confere	•					
	Master	Development A	oplication Form					
	Use Pe	ermit Application	Form					
	Сору	of an approved C	ertificate of Appropriateness (COA) if located within the D1 Downtown district or within a historic district					
	Сору с	of an approved C	ertificate of Compliance (D2) if located within the D2 Uptown district					
		Application fee as established in the Portsmouth Fee Schedule identified in Appendix D of the Portsmouth Development Procedures Manual						
	Revision	on number (if app	plicable)					
	Proposed or existing development name (if different from project name)							
	Project address and parcel number(s)							
	Name, address, telephone number, fax number, and seal number of all design professionals participating in the development application							
	A summary of existing use(s) of the site							
	Written description of project including proposed use and site operations/activities (population, number of employees, hours of operation, etc.)							
	Transportation analysis, if required							
	Any additional information determined to be necessary by the Planning Department							
B. Site Details (scale 1" = 20') that includes the following: (Deviations require prior approval from Planning Department)								
	All bas	e and overlav zo	ning district classifications adjacent to the site					
	Parcel boundaries of all parcels adjacent to the site							
	Names of all subdivisions and land owners owning lots adjacent to the site							

Project Address:								
Tax Parc	el Identificati	on Number:						
2. Submittal Requirement Checklist cont'd								
	Existing streets within 200' of site with names, centerline, curb and gutter elevations and slopes, height, width, and thickness of paving rights-of-way							
	Planned road network (including street names if available) within 500' of site (if different from existing streets)							
	Existing land uses on the site and adjacent parcels (including across any streets)							
	All easements (including drainage) with dimensions and designation as to type							
	All historic properties and districts adjacent to the site							
	Location and description of all existing man-made structures and site features (including utilities, monuments, etc.) both above and below ground							
	Location of existing curb cuts, private streets, parking and loading areas, pedestrian walks, lighting facilities, and outside trash storage facilities							
	Outlines of proposed buildings, including use of each room, ingress/egress, bathrooms, etc.							
	Approximate location of off-street surface parking areas (including number of spaces)							
	Approximate location, height, and materials of proposed fences or walls							
	Approximate location and type of proposed landscaping							
	Approximate location and type of proposed signage							
	Proposed building heights (in feet and stories)							
	Description of the type of material(s) used on each façade elevation							
	Materials board (2' by 3') demonstrating material and color of all primary and accent building materials for development within the D1, D2, or an activity center district							
	Elevation for each building side facing a street, public open space, or public building with benchmarks shown (elevations referenced from City of Portsmouth datum)							
	Amount of fenestration on the ground floor and upper floor front façade areas of a commercial building							
	Screening devices and techniques for all ground-based and roof-mounted utility equipment							
	Location of all refuse collection areas, including location of dumpster pads, screening devices, and screening gates							



Master Development Application Form

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Notes:

- 1. All applications require the submission of this Master Development Application Form and the submission of a Specific Procedure Review Form for the proposed activity. Only one Master Development Application Form is required for each project, regardless of the number of actions, permits, or reviews required.
- 2. No action will take place, nor will the request be placed on any agenda, if staff determines that the application is not complete.
- 3. No application will be processed while violations exist on the property or if there are outstanding fines, taxes, liens, or other fees are owed to the City of Portsmouth.
- 4. A Certificate of Appropriateness is required prior to any activity in the D1 Downtown District or any Historic District (i.e., Olde Towne, Port Norfolk, Park View, Cradock, or Truxtun). See staff prior to application. A Certificate of Compliance (D2) is required prior to any activity in the D2 Uptown District (Form-Based Code).

prior to any activity in the D2 Uptown District (Form-Based Code).								
1. General Project Information								
Project Address:	et Address:							
Tax Parcel Identification Number:								
Lot Area (in square feet):								
Zoning District:								
2. Proposed Activity – Please check all that apply (PC) = A preapplication conference must be completed prior to submission of the Master Development Application Form.								
Proposed Use:								
Check all permits or reviews that apply	r:							
☐ Zoning Verification Request	☐ Use Permit (PC)	☐ Variance Permit (PC)						
☐ Building Permit	☐ Zoning Compliance Permit	☐ Zoning Compliance Permit (Signs)						
☐ Temporary Use Permit	☐ Certificate of Occupancy	☐ Zoning Map Amendment (PC)						
☐ Certificate of Appropriateness	☐ Type I Development Plan	☐ Minor Subdivision						
☐ Certificate of Compliance (D2)	☐ Type II Development Plan (PC)	☐ Major Subdivision (PC)						
☐ Wetland Permit	☐ Interpretation Request	☐ Subdivision Exception						
☐ Flood Plain Certificate	☐ Land Disturbance Permit	☐ Encroachment						
☐ Street Closure	☐ Chesapeake Bay Exception							
☐ Appeals	Administrative Adjustment or Alternative Form of Compliance							
3. Primary Point of Contact Information								
Please circle the preferred method of contact (mail, telephone, fax, or e-mail)								
Primary Point of Contact Name:								
Mailing Address:								
Phone No.:	Fax No.:							
Email:								

4. Property Owner Information (if different from the primary point of contact) The property owner must sign a property owner consent box (See item number 5 on the following page.).								
Property Owner Contact Name:								
Mailing Address:								
Phone No.: Fax No.:								
Email:								
			5. Property	Owner(s) Co	nsent			
Project Addre	ess:							
Tax Parcel Id	lentifica	ation Number:						
The names, addresses, telephone numbers, and signatures of all owners of the property are required. Please attach additional sheets as needed. If a legal representative signs for a property owner, please attach an executed power of attorney. Faxed or photocopied signatures will not be accepted.								
By signing this application below, I, as the owner of the property under review, give my endorsement of this application.								
Property Owr	Property Owner or Authorized Signature: Date Signed:							
If a business for such busi			the following is the name a	nd title of the i	individual authoriz	ed to sign, as the property owner above,		
Name of Person Authorized to Sign:								
Title of Person Authorized to Sign:								
Mailing Addre	ess:							
Phone No.:								
6. Applicant's Signature								
By signing this application below, I hereby attest to the truth and accuracy of all facts and information presented with this application.								
Applicant's Signature:						Date Signed:		
OFFICE USE ONLY				Project Number (Tidemark):				
Received By	·:				Received Date:			
Accepted as Complete By:					Accepted Date:			