1. General Project Information (if applicable to a particular site)

<table>
<thead>
<tr>
<th>Project Address:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Tax Parcel Identification Number:</td>
<td></td>
</tr>
</tbody>
</table>

2. Written Description of Request (attach additional pages as needed)

A) Identify what standard(s) or requirement(s) of the zoning ordinance that is the subject of this interpretation request.

B) Provide a description explaining the proposal and any additional reasons or material in support of proposed interpretation.

C) Provide any technical evidence (attach more pages as necessary) to support the proposed interpretation and a description of how the interpretation carries out the intent and purpose of the zoning ordinance and applicable zoning district.

3. Submittal Requirement Checklist

(Submittals should include 3 copies of listed items, unless otherwise stated.)

- [ ] Master Development Application Form
- [ ] Interpretation Request Form
- [ ] Application fee as established in the Portsmouth Fee Schedule identified in Appendix D of the Portsmouth Development Procedures Manual
- [ ] Any other information determined to be necessary by the Planning Department

Interpretation Request

Last updated Jun1, 2010
**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).

### 1. General Project Information

#### Project Address:

#### Tax Parcel Identification Number:

#### Lot Area (in square feet):

#### Zoning District:

### 2. Proposed Activity – Please check all that apply

(See zoning verification request in Section 3. Primary Point of Contact Information.)

- **Proposed Use:***

- **Check all permits or reviews that apply:**
  - [ ] Zoning Verification Request
  - [ ] Building Permit
  - [ ] Temporary Use Permit
  - [ ] Certificate of Appropriateness
  - [ ] Certificate of Compliance (D2)
  - [ ] Wetland Permit
  - [ ] Flood Plain Certificate
  - [ ] Street Closure
  - [ ] Appeals
  - [ ] Use Permit (PC)
  - [ ] Zoning Compliance Permit
  - [ ] Certificate of Occupancy
  - [ ] Interpretation Request
  - [ ] Chesapeake Bay Exception
  - [ ] Administrative Adjustment or Alternative Form of Compliance
  - [ ] Variance Permit (PC)
  - [ ] Zoning Compliance Permit (Signs)
  - [ ] Zoning Map Amendment (PC)
  - [ ] Type I Development Plan
  - [ ] Type II Development Plan (PC)
  - [ ] Major Subdivision (PC)
  - [ ] Subdivision Exception
  - [ ] Land Disturbance Permit
  - [ ] Encroachment

### 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.).

<table>
<thead>
<tr>
<th>Property Owner Contact Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address:</td>
<td></td>
</tr>
<tr>
<td>Phone No.:</td>
<td>Fax No.:</td>
</tr>
<tr>
<td>Email:</td>
<td></td>
</tr>
</tbody>
</table>

5. **Property Owner(s) Consent**

<table>
<thead>
<tr>
<th>Project Address:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Tax Parcel Identification Number:</td>
<td></td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>Property Owner or Authorized Signature:</th>
<th>Date Signed:</th>
</tr>
</thead>
</table>

If a business entity owns the property, the following is the name and title of the individual authorized to sign, as the property owner above, for such business entity.

<table>
<thead>
<tr>
<th>Name of Person Authorized to Sign:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Title of Person Authorized to Sign:</td>
<td></td>
</tr>
<tr>
<td>Mailing Address:</td>
<td></td>
</tr>
<tr>
<td>Phone No.:</td>
<td></td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>Applicant’s Signature:</th>
<th>Date Signed:</th>
</tr>
</thead>
</table>

---

**OFFICE USE ONLY**

<table>
<thead>
<tr>
<th>Project Number (Tidemark):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Received By:</td>
</tr>
<tr>
<td>Accepted as Complete By:</td>
</tr>
</tbody>
</table>