



COUNTY OF BATH, VIRGINIA
65 Courthouse Hill Road
P. O. Box 216
Warm Springs, VA 24484
(Please Make Checks Payable to Bath County Treasurer)

OFFICE PHONE: 540-839-7236
OFFICE FAX: 540-839-7222

REZONING APPLICATION

The undersigned owner of the following described property hereby applies for a change in the zoning classification of said property from: _____ to _____

Applicant:

Name: _____

Address: _____

Phone (Home) _____ Phone (work) _____

Owner(s): (If different than the above applicant.)

Name: _____

Address: _____

Phone (Home): _____ Phone (work): _____

PROPERTY INFORMATION:

1. Exact Directions to Property from Bath County Courthouse, Warm Springs, Virginia: _____

2. Property Information:

A. Size/Acreage of Property: _____

B. Current Land Use: _____

C. Current Zoning: _____

D. Current number of allowed dwelling units per acre or commercial/industrial development square feet per acre: _____

E. Zoning of Surrounding Land and Property: _____

F. Subdivision Name & Lot (if applicable): _____

3. Proposed Information:

A. Proposed Zoning Request: _____

B. Proposed Acreage to be rezoned: **(If rezoning request does not include entire property— provide a written metes and bounds description of area proposed for rezoning and boundary survey/plat showing all bearings and distances (metes and bounds).**

C. Size of Proposed Use: _____

D. Proposed dwelling units per acre or commercial/industrial development square feet per acre:

E Fully describe proposed use: _____

F. List Conditions Being Proffered by applicant/landowner: _____

4. The following are all of the individuals, firms, and/or corporations owning property adjacent to the property sought to be rezoned (include properties adjoining both sides, the rear, in front of and/or across the street, and any other properties in the vicinity which may be affected by this rezoning proposal). **Adjacent property owners are mailed a notice of the request.**

OWNER(s) NAME

ADDRESS

a. _____

b. _____

c. _____

d. _____

e. _____

(Names of adjoining owners may be located in the Commissioner of Revenue's Office in the Bath County Courthouse. Use the reverse side of this sheet should you need additional space.)

I/we the undersigned, do hereby respectfully agree to comply with any conditions required by the County of Bath, Virginia, and authorize the County personnel to go upon the property for the purpose of making site inspections. Expenses incurred in securing professional assistance in connection with the review of this application for Rezoning, shall be charged to the applicant. I/we certify that this petition/application for rezoning and the information submitted herein is correct and accurate. **I am aware that no case will be heard without representation. Applications submitted for Rezoning need to be submitted by the last Friday of preceding month in order to be heard that month by the Planning Commission.**

Applicant (Signature/Date)

Owner (Signature/Date)

CHECKLIST FOR PLAT WITH SITE PLAN

Plats with site plans shall include but not be limited to:

- _____ Lot Dimensions – with property line monuments located
- _____ Existing Structures – location and size
- _____ Proposed Structures – location and size
- _____ Use of Structures – existing and proposed
- _____ Known Easements and/or Right-of-Ways (Public & Private)
- _____ Location and Type of:
 - _____ Utilities
 - _____ Water Courses
 - _____ Fences
- _____ Streets (include Name), Driveway(s), and Off-Street Parking (Locations and Dimensions)
- _____ Note source of water supply and means of sewage disposal (Existing and Proposed)
- _____ Adjoining Landowners

HELPFUL INFORMATION

There are a number of factors which the Planning Commission and the Board of Supervisors may consider when reviewing an application to rezone a property. The attempt is to ensure that such rezoning is consistent with the overall Zoning Plan for each community and Comprehensive Plan of the entire County. The following are among the factors which may be considered:

- a. Has a need for rezoning been established:
- b. Is the proposal consistent with the existing character of the community?
- c. Will the rezoning promote orderly development of the community?
- d. Will the rezoning adversely affect traffic flow or impede the normal flow of traffic?
- e. Are there sufficient utilities available to support the proposed use (water/sewer/phone/electric)?
- f. Will the rezoning adversely affect land values and/or the use and enjoyment of surrounding properties?
- g. Will the rezoning constitute an illegal spot zoning?
- h. Is the rezoning consistent with the County's overall land use development plan?

DEPARTMENT USE ONLY

CASE NUMBER: _____ Deed Book # _____ Page _____

Magisterial District: _____ Zoning District: _____ Tax Map No.: _____

Applicable Code Section(s): _____

Date Authorized for Advertisement: _____ Advertising Deadline: _____

Building Department Review/Comments: _____

Planning/Zoning Department Review Comments: _____

Planning Commission Hearing Date: _____

Planning Commission Recommendation: _____ Vote: _____

Planning Commission Conditions Attached to Application: _____

Board of Supervisors Public Hearing Date: _____

Board of Supervisors Decision: _____ Vote: _____

Board of Supervisors Conditions Attached to Application: _____

Payment of Fees:

Rezoned to Agricultural	\$150.00
Rezoned to Residential	\$275.00 + \$25.00 per acre
Rezoned to Business	\$300.00 + \$25.00 per acre
Rezoned to Industrial	\$300.00 + \$25.00 per acre

TOTAL FEES PAID \$ _____