



Application for
Use Permit

OFFICE USE ONLY
Date Received:

RECEIVED

MAY 22 2018

CDD 5TH FLOOR

Complete this application in its entirety and submit pages 4 and 5 along with the required materials (including any required supplements) as listed on page 2 to the address below:

City of Hampton
Community Development Department, Planning Division
22 Lincoln Street, 5th Floor
Hampton, Virginia 23669

Case Number: UP 18 - 00006

1. PROPERTY INFORMATION

Address or Location 700 Greenlawn Ave

LRSN 1007652 Zoning District M-3

Current Land Use Light Industrial

Proposed Land Use Communication site

The proposed use will be in: an existing building a new addition a new building

2. PROPERTY OWNER INFORMATION (an individual or a legal entity may be listed as owner)

Owner's Name Joel Bruce

Address 661 Kelson Dr City Newport News State VA Zip 23601

Phone _____ Email _____

3. APPLICANT INFORMATION (if different from owner)

Applicant's Name HFS Development Group

Address 2528 Horse Pasture Rd City Virginia Beach State VA Zip 23453

Phone 757-650-1673 Email ce@fci Towers.com

4. APPLICANT AGENT INFORMATION (if different from applicant)

Agent's Name C.E. Forehand c/o FCI Towers Inc

Address 2528 Horse Pasture Rd City Virginia Beach State VA Zip 23453

Phone 757-650-1673 Email ce@fci Towers.com

5. CERTIFICATION FOR LEGAL ENTITY PROPERTY OWNERS

Complete this section only if the property owner is **not** an individual but rather a legal entity such as a corporation, trust, LLC, partnership, diocese, etc. as specified in Step 2 above.

"I hereby submit that I am legally authorized to execute this application on behalf of the fee-simple owner of this property. I have read this application and it is submitted with my full knowledge and consent. I authorize city staff and representatives to have access to this property for inspection. The information contained in this application is accurate and correct to the best of my knowledge."

Name(s), title(s), signature(s), and date(s) of authorized representative(s) of the legal entity (attach additional page if necessary):

Name of Legal Entity Joel Bruce

Signed by:

Name (printed) _____, Its (title) _____

Signature _____ Date _____

Name (printed) N, Its (title) _____

Signature _____ Date _____

Name (printed) _____, Its (title) _____

Signature _____ Date _____

6. CERTIFICATION FOR INDIVIDUAL PROPERTY OWNERS

Complete this section only if the property owner is an individual or individuals.

"I hereby submit that I am the fee-simple owner of this property. I have read this application and it is submitted with my full knowledge and consent. I authorize city staff and representatives to have access to this property for inspection. The information contained in this application is accurate and correct to the best of my knowledge."

Name(s), signature(s), and date(s) of owner(s) (attach additional page if necessary):

Name (printed) Joel M. Bruce

Signature _____ Date 5/23/18

Name (printed) N/A

Signature _____ Date N/A

OFFICE USE ONLY		
<input type="checkbox"/> Application Form	<input type="checkbox"/> Narrative Statement	<input type="checkbox"/> Supplemental Form (if required)
<input type="checkbox"/> Application Fee	<input type="checkbox"/> Survey Plat	<input type="checkbox"/> Additional materials (if required)