

**CITY OF HAMPTON, VIRGINIA
LAND USE APPLICATION**

Office Use Only:

Case Number: _____

Date Received: _____

Select the appropriate box:

- ☐ APPEAL OF ZONING ADMINISTRATOR'S DECISION * (also complete Section 1 on reverse)
☐ CONDITIONAL PRIVILEGE (also complete Section 2 on reverse)
☐ REZONING (also complete Section 3 on reverse)
☐ SPECIAL EXCEPTION * (also complete Section 2 on reverse)
☒ USE PERMIT (also complete Section 2 on reverse)
☐ VARIANCE * (also complete Section 4 on reverse)

INFORMATION REQUIRED FOR ALL APPLICATIONS:

Property Address/Legal Description: 3116 & 3120 VICTORIA BOULEVARD

Current Land Use: VACANT SITE (FORMER SENTARA HOSPITAL)

Current Zoning: R-11

- PROPOSE TO:
- ☐ Use an existing building
☐ Construct an addition
☒ Construct a new building

Proposed Land Use: NEW PUBLIC PR-K-8 GRADE SCHOOL
(If no specific use is proposed, please note.)

OWNER INFORMATION:

Owner's Name: HAMPTON CITY SCHOOLS

Address: ONE FRANKLIN STREET
HAMPTON, VIRGINIA 23666

Phone Number: 727-2340

E-mail: vhellman@sbo.hampton.k12.va.us

APPLICANT INFORMATION: (if different from 'Owner')

Applicant Name: _____

Address: _____

Phone Number: _____

E-mail: _____

Applicant's Agent: _____

Address: _____

Phone Number: _____

E-mail: _____

OWNER AUTHORIZATION: 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 THE PROPERTY FOR INSPECTION. THE INFORMATION CONTAINED IN THIS APPLICATION IS ACCURATE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

OWNER'S NAME (please print)

CHARLES A. ROBERTS

OWNER'S SIGNATURE AND DATE

Charles A. Roberts 3/26/07

DEVELOPMENT OF ANY PROPERTY IS SUBJECT TO COMPLIANCE WITH ALL APPLICABLE CODES, REGULATIONS AND ORDINANCES, WHETHER OR NOT THEY ARE SPECIFIED IN THE APPROVAL OF ANY LAND USE APPLICATION

CITY OF HAMPTON, VIRGINIA LAND USE APPLICATION

Please complete the applicable section:

SECTION 1: APPEALS OF THE ZONING ADMINISTRATOR'S DECISION

FEE: If Associated With Single Family Residential Use: \$75; All Others: \$200

DATE OF THE DECISION BEING APPEALED: _____

DESCRIPTION OF THE APPEAL:

--ALLOW AT LEAST TWO (2) BUSINESS DAYS AFTER HEARING BEFORE REQUESTING ANY PERMITS.--

SECTION 2: CONDITIONAL PRIVILEGE; USE PERMIT; SPECIAL EXCEPTION

FEES: **CONDITIONAL PRIVILEGE:** \$650

USE PERMIT: \$650

SPECIAL EXCEPTION: If Associated With Single Family Residential Use: \$75; All Others: \$200

NOTE: (a) Day Care, Bed & Breakfast, Communication towers require a supplemental information form be submitted with this application
(b) Communication towers require additional information as specified in the Zoning Ordinance to be submitted with this application.

PROPOSED HOURS OF OPERATION:	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
PUBLIC COMMUNITY							
USE OF SCHOOL & SITE							
AFTER SCHOOL HOURS							
FROM:	7:00 AM	7:00 AM	7:00 AM	7:00 AM	7:00 AM	VARIES	VARIES
TO:	5:00 PM	5:00 PM	5:00 PM	5:00 PM	5:00 PM		

SECTION 3: REZONING

FEE: \$650 for 1st acre (or any part thereof) PLUS \$100 per additional acre (or any part thereof)

NOTE: Rezoning requires a proffer statement to be submitted with this application.

PROPOSED ZONING AND USE OF THE PROPERTY:

SECTION 4: VARIANCES

FEE: If Associated With Single Family Residential Use: \$75; All Others: \$200

DESCRIPTION OF THE REQUEST:

* *No variance shall be authorized by the board unless it finds:*

1. That strict application of the Ordinance would produce undue hardship
2. That such hardship is not shared generally by other properties in the same zoning district and vicinity.
3. That the authorization of such variance will not be of substantial detriment to the adjacent property and that the character of the district will not be changed by the granting of the variance.

--ALLOW AT LEAST TWO (2) BUSINESS DAYS AFTER HEARING BEFORE REQUESTING ANY PERMITS.--

**PLEASE REVIEW THE "ADDITIONAL REQUIREMENTS" CHECKLIST (PAGE 3)
BEFORE SUBMITTING YOUR APPLICATION.**