



Application for  
**Use Permit**

OFFICE USE ONLY  
Date Received:  
**RECEIVED**  
**OCT -3 2017**  
**CDD 5<sup>TH</sup> FLOOR**  
Case Number: UP 17-00012

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

**1. PROPERTY INFORMATION**

Address or Location 1619 W Pembroke Ave, Hampton, VA 23661

LRSN 1002424 Zoning District C-3

Current Land Use storage

Proposed Land Use towing & storage

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 Ron Don Properties, LLC

Address 1601 W Pembroke Ave City Hampton State VA Zip 23661

Phone 757-722-2919 Email donnag222@gmail.com

**3. APPLICANT INFORMATION (if different from owner)**

Applicant's Name DAVID SWARTZ

Address 13 Paddock dr City Newport News State VA Zip 23606

Phone 757-506-4690 Email OldTameRecoveryPeruuel@gmail.com

**4. APPLICANT AGENT INFORMATION (if different from applicant)**

Agent's Name Donna Barrett

Address 1601 W Pembroke Ave City Hampton State VA Zip 23661

Phone 757-722-2919 Email donnag222@gmail.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 Ron Don Properties, LLC

Signed by:

Name (printed) Donna H. Garrett, Its (title) Member

Signature [Signature] Date 10/3/17

Name (printed) Ronald S. Garrett, Its (title) member

Signature [Signature] Date 10/3/17

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) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (printed) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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)