

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 OFFICE USE ONLY Date Received:

## RECEIVED

APR 0 4 2016

PLANNING DEPT.

Case Number, UP 16 - 0-0 0 02

1. PROPERTY INFORMATION						
Address or Location 1741 W. Queen Street						
LRSN 3004764	Z	oning District R-1	1			
Current Land Use Church	2/412					
Proposed Land Use Church and Childcare						
The proposed use will be in:  an exis	sting building	☐ a new addition	☐ a new l	building		
2. PROPERTY OWNER INFORMATION (an individual or a legal entity may be listed as owner)						
Owner's Name Phillip Privette, Sr.						
Address 1741 W. Queen Street	<sub>City</sub> Ham	pton (	State_VA_Zip_23	8666		
Phone 757-838-1304	Email_pastorphil@victorylife.com					
	8					
3. APPLICANT INFORMATION (if different from owner)						
Applicant's Name Debbie Privette						
Address 21310 Vineyard Ct.	<sub>City_</sub> SmitI	nfield s	State_VA_Zip_23	3430		
Phone 757-838-1304		tte@victorylife.		ā		
4. APPLICANT AGENT INFORMATION (if Agent's Name						
Address		***	State Zin			
Phone						

## 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 o	f Legal Entity Victory Li	fe World Outreach Ce	enter Church		
Signed I	Name (printed) Phillip	M. Privette, Sr.	, Its (title) Owner		
	Signature hilly	, ns (title) April 1, 2016			
	Name (printed) Barbar	a Privette	, Its (title) Owner		
	Signature Dull w	la Sivette	<sub>Date</sub> _April 1, 2016		
	None of selection				
	Name (printed)	n n	, Its (title)		
	Signature		Date		
6. CER	TIFICATION FOR INDIVIDU	AL PROPERTY OWNERS			
Complete	e this section only if the prope	rty owner is an individual or individ	duals.		
my full kr	nowledge and consent. I auth	orize city staff and representatives	ead this application and it is submitted with to have access to this property for correct to the best of my knowledge."		
Name(s), signature(s), and date(s) of owner(s) (attach additional page if necessary):					
	rinted) Phillip M. Priv				
Signature Rully M Kineth 2 Date April 1, 2016					
Name (p	rinted) Barbara Prive	tte			
Signature	Darliara E	Privette	April 1, 2016		
OFFICE USE ONLY					
	☐ Application Form	☐ Narrative Statement ☐	☐ Supplemental Form (if required)		
	☐ Application Fee	☐ Survey Plat	☐ Additional materials (if required)		



Complete this supplement in its entirety and submit with the completed Use Permit application form to the address below:

City of Hampton Community Development Department, Planning Division 22 Lincoln Street, 5th Floor Hampton, Virginia 23669 OFFICE USE ONLY Date Received:

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APR 0 4 2016

## PLANNING DEPT.

Case Number: UP 16-0002

1. LOT INFORMATION
Lot Width Lot Depth Total Lot Area (ac. or sq. ft.) 2.63 acres
Area to be Fenced (ac. or sq. ft.) 1, 716 sq. ft. Fence Height 4 ft. Fence Type Metal
Area of Outdoor Play Area (ac. or sq. ft. – if different from area to be fenced above) 1, 716 sq. ft.
Current Number of On-site Parking Spaces 274 Proposed Number of On-site Parking Spaces 274
☐ Please attach a sketch showing the parking area and the circulation to, from and within the parking lot
2. BUILDING INFORMATION (Total building: 62, 610 sq. ft. Daycare portion only listed below)
Square Footage 29,377 sq. ft. Stories 2 Number of Classrooms 7
Number of Offices 3 Number of Kitchens 1 Number of Toilets 19
Number of Washbasins 14 Area of Indoor Play Area (sq. ft.) 2, 366 sq. ft.
ls this currently an occupied residence? ☐ Yes ✓ No Will this be an occupied residence? ☐ Yes ✓ No
Type of Construction: ☐ Wood Frame with Siding ☐ Wood Frame with Brick ☐ Masonry
✓ Other (describe) Metal Frame with Metal Siding
☐ Please attach a floor plan showing rooms labeled with square footage, use and (for classrooms) ages of children
3. OPERATIONAL INFORMATION
Number of Clients 100 Age Range of Clients 6 wks-12 yrs Number of Employees 15
Hours of Operation: Mon 6am-6pm Tue 6am-6pm Wed 6am-6pm Thu 6am-6pm
Fri 6am-6pm Sat Sun Sun
4. LICENSING
Name of State Licensing Agency Department of Social Services