

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

MAR 0 1 2018 CDD 5TH FLOOR

Case Number: UP 2 0 1 9 0 0 02

1. PROPERTY INFORMATION		2		
Address or Location 66 W	Mercury	Drive	USZ comment	
LRSN 8005697		Zoning District	C-1	
Current Land Use Office) cotomod emen	
Proposed Land Use SChool (D	riving)	211. 1 - 16. 1 1 1 2	777 simisulas	
The proposed use will be in:	existing building	☐ a new addition	n 🔲 a new b	ouilding
2. PROPERTY OWNER INFORMATION	l (an individual o	r a legal entity may be	e listed as owner)	
Owner's Name WilF	UI	NZ.	M SICH MOU ACES	275.0
Address 66 W. MERCURY BL	VD#2City	YAM FTON	State A Zip 2	3669
Phone 757-727-05/	5 Email	ANTA - ren annalyme-us	hadi ma shejir tiqiasis	1000
3. APPLICANT INFORMATION (if diffe	2012 M - 1200 HUUS 16			
Applicant's Name Alisha Sprat	rley-Thoma	S	· · · · · · · · · · · · · · · · · · ·	-
Address 1 Douglas St.	City_ 	ampton	State <u>√</u> Zip <u> </u>	<u>3663</u>
Phone <u>151-234-8450</u>	Email <u>QK(</u>	aleelee 79@	(aha).com	
4 ADDI IOANT ACENT INFORMATION	. //c . !/cc / c			
4. APPLICANT AGENT INFORMATION	1		Marca M	A)T TA
Agent's Name West VR		. / 0 -		2/V/ 7/V
Address 66 W. MeRCVRY B	City 1	14MYDN	State \sqrt{N} Zip $\overline{2}$.	3669
Phone 757-727-75)5	Email Meh	RUBY PROPER	RTY MANA	respen;
		D519	50	4
			S Q MANA	Air.
				(1)
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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 representationage if necessary):	ative(s) of the legal entity (attach additional
Name of Legal Entity AFR Driving School H	
Signature Signature	ve read this application and it is submitted with ves to have access to this property for
Name(s), signature(s), and date(s) of owner(s) (attach additional p	age if necessary):
Name (printed)	
Signature	Date
Name (printed)	
Signature	Date
CERRETH PROPERTY NO	1/16 h 2 V 19 K
OFFICE USE ONLY ☐ Application Form ☐ Narrative Statement	☐ Supplemental Form (if required)
☐ Application Fee ☐ Survey Plat	☐ Additional materials (if required)