

PERMIT # _____

DATE SUBMITTED _____

LAWRENCEVILLE, VIRGINIA
ZONING PERMIT APPLICATION

1. APPLICANT:
2. ADDRESS AND TELEPHONE:
3. PARCEL LOCATION:
4. PARCEL SIZE:
5. PARCEL ZONING:
6. PROPOSED USE:
7. ZONING ORDINANCE SECTION:
8. WATER SUPPLY/SEWAGE DISPOSAL APPROVAL:
9. SITE PLAN MUST BE ATTACHED:
10. \$25.00 APPLICATION FEE MUST BE ATTACHED.

CERTIFICATION

I hereby certify that I have the authority to make the foregoing application and that the information given is true and accurate to the best of my knowledge.

SIGNATURE OF APPLICANT

DATE

ZONING PERMIT

APPROVED _____

DISAPPROVED _____

NEEDS REZONING _____

NEEDS CONDITIONAL USE PERMIT _____

OTHER _____

ZONING ADMINISTRATOR

DATE

