

Application for Initial Site Plan or Final Site Plan or Site Plan Exception



Project Name: _____

Tax map and parcel(s): _____ **Zoning:** _____

Contact (who should we contact about this project) _____

Street Address _____

City _____ **State** _____ **Zip Code** _____

Phone Number _____ **Email** _____

Owner of Record _____

Street Address _____

City _____ **State** _____ **Zip Code** _____

Phone Number _____ **Email** _____

Applicant _____

Street Address _____

City _____ **State** _____ **Zip Code** _____

Phone Number _____ **Email** _____

Type of Development

<input type="checkbox"/> Residential Type of unit(s): _____ # of building(s): _____ Sq. ft. of building(s): _____ # of units per building: _____ Total # of units: _____ Resulting density: _____ Acreage of site: _____ Acreage in open space: _____ Acreage in roads: _____ Average gallons of water used per day: _____	<input type="checkbox"/> Non-residential <div style="margin-left: 20px;"> <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Quasi-Public </div> Sq. ft. of building(s): _____ Acreage of site: _____ Acreage in open space: _____ Acreage in roads: _____ Average gallons of water used per day: _____
---	---

FOR OFFICE USE ONLY	SDP # _____
Fee Amount \$ _____	Date Paid _____
By who? _____	Receipt # _____
Ck# _____	By: _____

County of Albemarle
Department of Community Development
401 McIntire Road Charlottesville, VA 22902 Voice: (434) 296-5832 Fax: (434) 972-4126

