

MIDDLESEX COUNTY

Department of Planning and Community Development
P.O. Box 428, Saluda, VA 23149
Phone: 804-758-3382 Fax: 804-758-0061

CBPA NONCONFORMING USE WAIVER APPLICATION

Revised: 6/6/17

This waiver request is only applicable for nonconforming structure(s) on legal nonconforming parcels to provide for remodeling, alterations or additions to such nonconforming structures. Please note that accessory structures are not eligible for a CBPA nonconforming use waiver.

OFFICE USE ONLY

Application #:	_____	Application Fee:	<input type="checkbox"/> \$150
Tax Query:	<input type="checkbox"/> Current <input type="checkbox"/> Delinquent	Surety Amount:	\$ _____
Zoning Decision:	<input type="checkbox"/> Approval <input type="checkbox"/> Denied	E & S Decision:	<input type="checkbox"/> Approval <input type="checkbox"/> Denied
Conditions/Comments:	_____ _____ _____		
_____	_____	Expiration Date:	_____
Zoning Administrator Signature	Date		

APPLICANT INFORMATION

Name: _____
Address: _____ City/State/Zip: _____
Phone: _____ Fax: _____

PROPERTY OWNER INFORMATION

Name: _____
Address: _____ City/State/Zip: _____
Phone: _____ Fax: _____

PROJECT INFORMATION

Parcel Number: _____ E911/Street Address: _____
Magisterial District: _____ Zoning District: _____
Existing Land Use: _____

WAIVER REQUEST

Please answer the following questions:

1. Distance of proposed development to the nearest RPA feature: _____
2. Describe the waiver requested. _____

3. Describe why you cannot make other arrangements to comply with the Zoning Ordinance without a waiver. _____

WATER QUALITY IMPACT ASSESSMENT

A. Total Lot Area (ft²):

B. Total Existing Impervious Surface (ft²):

Principal Structure(s) (i.e. Dwellings) (ft²):

Accessory Structure(s) (i.e. Sheds, Garages, Outbuildings, Pools) (ft²):

Driveway and Parking Areas (ft²):

Other: _____

C. Total Proposed Impervious Surface (ft²):

New Principal Structure(s) (ft²):

Expansion of Principal Structure(s) (ft²):

New Accessory Structure(s) (ft²):

Expansion of Accessory Structure(s) (ft²):

Driveway and Parking Areas (ft²):

Other: _____

D. Percent Existing Impervious Surface (B / A):

E. Percent Proposed Impervious Surface ((B + C) / A):

F. Impacts on Existing Vegetation:

Total Amount of Underbrush Removed (ft²): _____ Number of Healthy Trees Removed: _____

Number of Trees Limbed or Pruned: _____ Number of Dead/Dying/Diseased Trees Removed: _____

G. Proposed Erosion and Sedimentation Control Practices:

Silt Fencing Temporary Construction Entrance

Straw Bale Barrier(s) Inlet Protection

Temporary/Permanent Seeding Mulching

Tree Protection Sediment Trap

Other: _____

H. Proposed Mitigation Measures:

Number of New Trees Proposed: _____ Number of New Shrubs Proposed: _____

I. Proposed Best Management Practices:

Vegetated Filter Strip(s) Grass Swale(s)

Dry Well(s) Infiltration Trench(es)

Other: _____

SITE DRAWING

A site drawing, which shows the following, must be attached to this water quality impact assessment:

1. Location of the components of the RPA, including the 100-foot buffer area;
2. Location and nature of any proposed encroachment into the buffer area, including, type of paving material; areas of clearing or grading; location of any structures, drives, or other impervious cover; and sewage disposal systems or reserve drainfield sites;
3. Type and location of proposed best management practices to mitigate the proposed encroachment;
4. Type and location of proposed erosion and sedimentation control devices;
5. Location of existing vegetation onsite, including the number and type of trees and other vegetation to be removed in the buffer to accommodate the encroachment or modification; and
6. Type and location of replacement vegetation.

APPLICANT STATEMENT

I hereby certify that I have the authority to make the foregoing application, that the information given is complete and correct to the best of my knowledge, and that development and/or construction will conform with the regulations as set forth in the Middlesex County Zoning Ordinance as written and also with the description contained in this application.

Applicant's Signature (if not Property Owner)

Date

Applicant's Signature (if not Property Owner)

Date

PROPERTY OWNER(S) STATEMENT

I hereby certify that I/we own the above described property, that the information given is complete and correct to the best of my knowledge, and that the above person(s), group, corporation or agent has the full and complete permission of the undersigned owner(s) to make application for CBPA Nonconforming Use Waiver approval as set forth in the Middlesex County Zoning Ordinance as written.

Property Owner's Signature

Date

Property Owner's Signature

Date

CONDITIONS

1. This permit application is not valid unless all property owner(s) signatures are affixed and dated.
2. All permit application charges are nonrefundable, regardless of whether the permit application is approved or denied once submitted. All checks for payment should be made payable to Middlesex County.
3. Any approval of a CBPA Nonconforming Use Waiver is issued on the basis of plans and applications approved and authorizes only the use, arrangement and construction set forth in such approved plans and applications. Any deviations from the plans and applications submitted shall render an approved CBPA Waiver null and void.

MIDDLESEX COUNTY

Department of Planning and Community Development

P.O. Box 428, Saluda, VA 23149

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CBPA EXCEPTION APPLICATION

Revised: 6/6/17

This exception request is applicable for new encroachments into the 100-foot Resource Protection Area (RPA) buffer.

OFFICE USE ONLY

Application #: _____ Application Fee: \$ 400

Tax Query: Current Delinquent Surety Amount: \$ _____

Reviewing Authority: _____ Hearing Date: _____

Zoning Decision: Approval Denied E & S Decision: Approval Denied

Conditions/Comments: _____

_____ Expiration Date: _____

Zoning Administrator Signature _____ Date _____

APPLICANT INFORMATION

Name: _____

Address: _____ City/State/Zip: _____

Phone: _____ Fax: _____

PROPERTY OWNER INFORMATION

Name: _____

Address: _____ City/State/Zip: _____

Phone: _____ Fax: _____

PROJECT INFORMATION

Parcel Number: _____ E911/Street Address: _____

Magisterial District: _____ Zoning District: _____

Existing Land Use: _____

EXCEPTION REQUEST

Please answer the following questions:

1. Distance of proposed development to the nearest RPA feature: _____
2. Describe the exception requested. _____

3. Explain why you must encroach into the Resource Protection Area 100-foot buffer. _____

4. Describe why you cannot make other arrangements to comply with the Zoning Ordinance without a CBPA Exception. _____

WATER QUALITY IMPACT ASSESSMENT

A. **Total Lot Area (ft²):** _____

B. **Total Existing Impervious Surface (ft²):** _____

Principal Structure(s) (i.e. Dwellings) (ft²): _____

Accessory Structure(s) (i.e. Sheds, Garages, Outbuildings, Pools) (ft²): _____

Driveway and Parking Areas (ft²): _____

Other: _____

C. **Total Proposed Impervious Surface (ft²):** _____

New Principal Structure(s) (ft²): _____

Expansion of Principal Structure(s) (ft²): _____

New Accessory Structure(s) (ft²): _____

Expansion of Accessory Structure(s) (ft²): _____

Driveway and Parking Areas (ft²): _____

Other: _____

D. **Percent Existing Impervious Surface (B / A):** _____

E. **Percent Proposed Impervious Surface ((B + C) / A):** _____

F. Impacts on Existing Vegetation:

Total Amount of Underbrush Removed (ft²): _____ Number of Healthy Trees Removed: _____

Number of Trees Limbed or Pruned: _____ Number of Dead/Dying/Diseased Trees Removed: _____

G. Proposed Erosion and Sedimentation Control Practices:

Silt Fencing Temporary Construction Entrance

Straw Bale Barrier(s) Inlet Protection

Temporary/Permanent Seeding Mulching

Tree Protection Sediment Trap

Other: _____

H. Proposed Mitigation Measures:

Number of New Trees Proposed: _____ Number of New Shrubs Proposed: _____

I. Proposed Best Management Practices:

Vegetated Filter Strip(s) Grass Swale(s)

Dry Well(s) Infiltration Trench(es)

Other: _____

SITE DRAWING

A site drawing, which shows the following, must be attached to this water quality impact assessment:

1. Location of the components of the RPA, including the 100-foot buffer area;
2. Location and nature of any proposed encroachment into the buffer area, including, type of paving material; areas of clearing or grading; location of any structures, drives, or other impervious cover; and sewage disposal systems or reserve drainfield sites;
3. Type and location of proposed best management practices to mitigate the proposed encroachment;
4. Type and location of proposed erosion and sedimentation control devices;
5. Location of existing vegetation onsite, including the number and type of trees and other vegetation to be removed in the buffer to accommodate the encroachment or modification; and
6. Type and location of replacement vegetation.

APPLICANT STATEMENT

I hereby certify that I have the authority to make the foregoing application, that the information given is complete and correct to the best of my knowledge, and that development and/or construction will conform with the regulations as set forth in the Middlesex County Zoning Ordinance as written and also with the description contained in this application.

Applicant's Signature (if not Property Owner)

Date

Applicant's Signature (if not Property Owner)

Date

PROPERTY OWNER(S) STATEMENT

I hereby certify that I/we own the above described property, that the information given is complete and correct to the best of my knowledge, and that the above person(s), group, corporation or agent has the full and complete permission of the undersigned owner(s) to make application for CBPA Exception approval as set forth in the Middlesex County Zoning Ordinance as written.

Property Owner's Signature

Date

Property Owner's Signature

Date

CONDITIONS

1. This permit application is not valid unless all property owner(s) signatures are affixed and dated.
2. All permit application charges are nonrefundable, regardless of whether the permit application is approved or denied once submitted. All checks for payment should be made payable to Middlesex County.
3. Any approval of a CBPA Exception is issued on the basis of plans and applications approved and authorizes only the use, arrangement and construction set forth in such approved plans and applications. Any deviations from the plans and applications submitted shall render an approved CBPA Exception null and void.

MIDDLESEX COUNTY

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RPA MODIFICATION PERMIT APPLICATION

Revised: 6/06/17

This modification request is only applicable for permitted modifications to the 100-foot Resource Protection Area (RPA) buffer as outlined in Article 4A, Section 4A-8 of the Middlesex County Zoning Ordinance.

OFFICE USE ONLY

Application #: _____ Application Fee: \$150
Tax Query: Current Delinquent Surety Amount: \$ _____
Zoning Decision: Approval Denied E & S Decision: Approval Denied
Conditions/Comments: _____

Zoning Administrator Signature _____ Date _____ Expiration Date: _____

E & S Administrator Signature _____ Date _____

APPLICANT INFORMATION

Name: _____
Address: _____ City/State/Zip: _____
Phone: _____ Fax: _____

PROPERTY OWNER INFORMATION

Name: _____
Address: _____ City/State/Zip: _____
Phone: _____ Fax: _____

RESPONSIBLE LAND DISTURBER (Required if over 2,500 SF of land disturbance)

Name: _____ RLD Number: _____
Phone: _____ Fax: _____

PROJECT INFORMATION

Parcel Number: _____ E911/Street Address: _____
Magisterial District: _____ Zoning District: _____
Lot Size (in Acres): _____ CBPA District: _____
Existing Land Use: _____

Purpose of Modification: Sight Lines and Vistas Shoreline Erosion Control (VMRC #: _____)
 Access Paths General Woodlot Management

Please describe the modification requested. _____

WATER QUALITY IMPACT ASSESSMENT

A. *Total Lot Area (ft²):* _____

B. *Total Amount of Disturbed Area (ft²):* _____

C. *Total Amount of Clearance (ft²):* _____

D. *Total Amount of Grading (ft²):* _____

E. *Impacts on Existing Vegetation:*

Total Amount of Underbrush Removed (ft²): _____ Number of Healthy Trees Removed: _____

Number of Trees Limbed or Pruned: _____ Number of Dead/Dying/Diseased Trees Removed: _____

F. *Proposed Erosion and Sedimentation Control Practices:*

- | | |
|--|--|
| <input type="checkbox"/> Silt Fencing | <input type="checkbox"/> Temporary Construction Entrance |
| <input type="checkbox"/> Straw Bale Barrier(s) | <input type="checkbox"/> Inlet Protection |
| <input type="checkbox"/> Temporary/Permanent Seeding | <input type="checkbox"/> Mulching |
| <input type="checkbox"/> Tree Protection | <input type="checkbox"/> Sediment Trap |
| <input type="checkbox"/> Other: _____ | |

G. *Proposed Mitigation Measures:*

Number of New Trees Proposed: _____ Number of New Shrubs Proposed: _____

H. *Proposed Best Management Practices:*

- | | |
|--|--|
| <input type="checkbox"/> Vegetated Filter Strip(s) | <input type="checkbox"/> Grass Swale(s) |
| <input type="checkbox"/> Dry Well(s) | <input type="checkbox"/> Infiltration Trench(es) |
| <input type="checkbox"/> Other: _____ | |

SITE DRAWING

A site drawing, which shows the following, must be attached to this water quality impact assessment:

1. Location of the components of the RPA, including the 100-foot buffer area;
2. Location and nature of any proposed encroachment into the buffer area, including, type of paving material; areas of clearing or grading; location of any structures, drives, or other impervious cover; and sewage disposal systems or reserve drainfield sites;
3. Type and location of proposed best management practices to mitigate the proposed encroachment;
4. Type and location of proposed erosion and sedimentation control devices;
5. Location of existing vegetation onsite, including the number and type of trees and other vegetation to be removed in the buffer to accommodate the encroachment or modification; and
6. Type and location of replacement vegetation.

APPLICANT STATEMENT

I hereby certify that I have the authority to make the foregoing application, that the information given is complete and correct to the best of my knowledge, and that development and/or construction will conform with the regulations as set forth in the Middlesex County Zoning Ordinance as written and also with the description contained in this application.

Applicant's Signature (if not Property Owner)

Date

Applicant's Signature (if not Property Owner)

Date

PROPERTY OWNER(S) STATEMENT

I hereby certify that I/we own the above described property, that the information given is complete and correct to the best of my knowledge, and that the above person(s), group, corporation or agent has the full and complete permission of the undersigned owner(s) to make application for RPA Modification Permit approval as set forth in the Middlesex County Zoning Ordinance as written.

Property Owner's Signature

Date

Property Owner's Signature

Date

CONDITIONS

1. This permit application is not valid unless all property owner(s) signatures are affixed and dated.
2. All permit application charges are nonrefundable, regardless of whether the permit application is approved or denied once submitted. All checks for payment should be made payable to Middlesex County.
3. Any approval of a RPA Modification Permit is issued on the basis of plans and applications approved and authorizes only the use, arrangement and construction set forth in such approved plans and applications. Any deviations from the plans and applications submitted shall render an approved RPA Modification Permit null and void.

Please describe the proposed development. _____

WATER QUALITY IMPACT ASSESSMENT

A. **Total Lot Area (ft²):** _____

B. **Total Existing Impervious Surface (ft²):** _____

Principal Structure(s) (i.e. Dwellings) (ft²): _____

Accessory Structure(s) (i.e. Sheds, Garages, Outbuildings, Pools) (ft²): _____

Driveway and Parking Areas (ft²): _____

Other: _____

C. **Total Proposed Impervious Surface (ft²):** _____

New Principal Structure(s) (ft²): _____

Expansion of Principal Structure(s) (ft²): _____

New Accessory Structure(s) (ft²): _____

Expansion of Accessory Structure(s) (ft²): _____

Driveway and Parking Areas (ft²): _____

Other: _____

D. **Percent Existing Impervious Surface (B / A):** _____

E. **Percent Proposed Impervious Surface ((B + C) / A):** _____

F. Impacts on Existing Vegetation:

Total Amount of Underbrush Removed (ft²): _____ Number of Healthy Trees Removed: _____

Number of Trees Limbed or Pruned: _____ Number of Dead/Dying/Diseased Trees Removed: _____

G. Proposed Erosion and Sedimentation Control Practices:

Silt Fencing Temporary Construction Entrance

Straw Bale Barrier(s) Inlet Protection

Temporary/Permanent Seeding Mulching

Tree Protection Sediment Trap

Other: _____

H. Proposed Mitigation Measures:

Number of New Trees Proposed: _____ Number of New Shrubs Proposed: _____

I. Proposed Best Management Practices:

Vegetated Filter Strip(s) Grass Swale(s)

Dry Well(s) Infiltration Trench(es)

Other: _____

SITE DRAWING

A site drawing, which shows the following, must be attached to this water quality impact assessment:

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2. Location and nature of any proposed encroachment into the buffer area, including, type of paving material; areas of clearing or grading; location of any structures, drives, or other impervious cover; and sewage disposal systems or reserve drainfield sites;
3. Type and location of proposed best management practices to mitigate the proposed encroachment;
4. Type and location of proposed erosion and sedimentation control devices;
5. Location of existing vegetation onsite, including the number and type of trees and other vegetation to be removed in the buffer to accommodate the encroachment or modification; and
6. Type and location of replacement vegetation.

APPLICANT STATEMENT

I hereby certify that I have the authority to make the foregoing application, that the information given is complete and correct to the best of my knowledge, and that development and/or construction will conform with the regulations as set forth in the Middlesex County Zoning Ordinance as written and also with the description contained in this application.

Applicant's Signature (if not Property Owner)

Date

Applicant's Signature (if not Property Owner)

Date

PROPERTY OWNER(S) STATEMENT

I hereby certify that I/we own the above described property, that the information given is complete and correct to the best of my knowledge, and that the above person(s), group, corporation or agent has the full and complete permission of the undersigned owner(s) to make application for CBPA Land Development Permit approval as set forth in the Middlesex County Zoning Ordinance as written.

Property Owner's Signature

Date

Property Owner's Signature

Date

CONDITIONS

1. This permit application is not valid unless all property owner(s) signatures are affixed and dated.
2. All permit application charges are nonrefundable, regardless of whether the permit application is approved or denied once submitted. All checks for payment should be made payable to Middlesex County.
3. Any approval of a CBPA Permitted Use / Encroachment Permit is issued on the basis of plans and applications approved and authorizes only the use, arrangement and construction set forth in such approved plans and applications. Any deviations from the plans and applications submitted shall render an approved CBPA Permitted Use / Encroachment Permit null and void.

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WATER QUALITY IMPACT ASSESSMENT

An engineer or design professional may be required to conduct this water quality impact assessment if the proposed land disturbance is greater than 10,000 square feet or the proposed encroachment is into the seaward 50 feet of the 100-foot Resource Protection Area (RPA) buffer.

Application Type: Zoning Permit CBPA Exception CBPA Land Development Permit
 RPA Modification Permit CBPA Nonconforming Use Waiver

Application # (OFFICE USE ONLY): _____ Parcel Number: _____

Impact of Proposed Development:

Total Amount of Disturbed Area (ft²): _____ Total Amount of Impervious Surface (ft²): _____

Total Amount of Clearance (ft²): _____ Total Amount of Grading (ft²): _____

Impacts on Existing Vegetation:

Total Amount of Underbrush Removed (ft²): _____ Number of Healthy Trees Removed: _____

Number of Trees Limbed or Pruned: _____ Number of Dead/Dying/Diseased Trees Removed: _____

Proposed Erosion and Sedimentation Control Practices:

- | | |
|--|--|
| <input type="checkbox"/> Silt Fencing | <input type="checkbox"/> Temporary Construction Entrance |
| <input type="checkbox"/> Straw Bale Barrier(s) | <input type="checkbox"/> Inlet Protection |
| <input type="checkbox"/> Temporary/Permanent Seeding | <input type="checkbox"/> Mulching |
| <input type="checkbox"/> Tree Protection | <input type="checkbox"/> Sediment Trap |
| <input type="checkbox"/> Other: _____ | |

Proposed Mitigation Measures:

Number of New Trees Proposed: _____ Number of New Shrubs Proposed: _____

Proposed Best Management Practices:

- | | |
|--|--|
| <input type="checkbox"/> Dry Well(s) | <input type="checkbox"/> Infiltration Trench(es) |
| <input type="checkbox"/> Vegetated Filter Strip(s) | <input type="checkbox"/> Grass Swale(s) |
| <input type="checkbox"/> Other: _____ | |

A site drawing, which shows the following, must be attached to this water quality impact assessment:

1. Location of the components of the RPA, including the 100-foot buffer area;
2. Location and nature of any proposed encroachment into the buffer area, including, type of paving material; areas of clearing or grading; location of any structures, drives, or other impervious cover; and sewage disposal systems or reserve drainfield sites;
3. Type and location of proposed best management practices to mitigate the proposed encroachment;
4. Location of existing vegetation onsite, including the number and type of trees and other vegetation to be removed in the buffer to accommodate the encroachment or modification; and
5. Type and location of replacement vegetation.

