



**Application and Review Procedure for a  
Variance or Appeal Hearing  
Before the Board of Zoning Appeals (BZA)  
Powhatan County, Virginia  
Department of Community Development**

**1. Pre-Application Conference**

The applicant must meet with representatives from the Department of Community Development to discuss the request and review process.

For a **Variance Request**, bring a sketch to the meeting that shows the proposed changes to occur on the property.

An **Appeal** of the Zoning Administrator's decision must be filed within thirty (30) days from the date the decision was rendered.

**2. Neighborhood Meeting**

Optional: The applicant may choose to hold a neighborhood meeting, where adjoining property owners and the general public are invited to learn more about the proposal.

**3. Application Submittal and Acceptance**

Applications are due to the Department of Community Development by the first Friday of each month. Incomplete applications will not be processed.

A complete **Variance** application will include:

- Application for a Hearing Before the BZA
- Variance Request Form
- Plat showing existing conditions and requested changes
- List of Adjacent Property Owners
- Statement of Validity of Information
- Ownership Disclosure
- Consent of Owner to Permit Request
- Applicant's Permission for Inspection of Property
- Required Application Fees
  - Variance: \$750.00

A complete **Appeal** application will include:

- Application for a Hearing Before the BZA
- Appeal Request Form
- List of Adjacent Property Owners
- Statement of Validity of Information
- Ownership Disclosure
- Consent of Owner to Permit Request
- Applicant's Permission for Inspection of Property
- Required Application Fees
  - Appeal: \$750.00

**4. Staff Review**

The application will be reviewed by the Department of Community Development and other local and state agencies. Once a complete application has been processed, the applicant will be notified of the date of the next BZA meeting.

**5. Board of Zoning Appeals: Public Hearing and Review**

The Board of Zoning Appeals will hold a public hearing and review the requested.

**6. Written Decision/Appeal**

The Department of Community Development staff will notify the applicant by letter of the BZA's decision. The applicant or any opponent may appeal the decision within 30 days to the Circuit Court.



**County of Powhatan, Virginia**

**Application for a Hearing  
Before the BZA**

**For Office Use Only**

Case Number

Powhatan County, Virginia  
Department of Community Development  
3834 Old Buckingham Road: Suite F  
Powhatan, VA 23139

<b>Applicant Information</b>	
Name of Applicant	
Mailing Address	
Phone Number	
Email Address	

<b>Owner Information</b> (Complete this section if the applicant is not the current property owner)	
Name of Owner	
Mailing Address	
Phone Number	
Email Address	

If the applicant is not the owner, the applicant must provide written documentation that the current property owner consents to the application (see form entitled *Consent of Owner(s) to Permit Request*).

If there are multiple owners, all owners must sign the application or provide other documentation consenting to the

<b>Applicant Representative</b> (Complete this section if correspondence should be directed to someone other than the applicant)	
Name of Representative	
Mailing Address	
Phone Number	
Email Address	

<b>Parcel Information</b>	
Tax Map Number	
Physical Address	
General Description of Property Location	
Existing Use of Property (include a description of any existing structures)	
Magisterial District	
Total Acreage	
Current Zoning	
Countywide Future Land Use: Land Use Designation	

Variance Request Form	
Requested Variance	
Zoning Ordinance Standard to be Modified (include section of code and current standard)	
The strict application of the zoning ordinance would effectively prohibit or unreasonably restrict the utilization of the property because:	
Approval of the requested variance will alleviate a clearly demonstrated hardship because:	
The requested variance is in harmony with the intended spirit and purpose of the ordinance because:	
Approval of the requested variance will not be of substantial detriment to adjacent properties because:	

*A plat showing all proposed changes to occur on the property, including all dimension of the lot, setbacks, and existing or proposed structures should be submitted with this application.*





**Statement of Validity of Information**

Every applicant shall sign the following document to substantiate the validity of submitted information.

I, being duly sworn, depose and say that I am the Lessee/Owner of the property involved in the application. If I am not the Lessee/Owner, I will provide written certification from the owner granting me the right to submit this application.

I declare that I have familiarized myself with the rules and regulations pertaining to preparing and filing this application. I further declare that the foregoing statements and answers provided throughout the various sections of this application are in all respects true and correct to the best of my knowledge and belief.

**Signature of Applicant**

**Name of Applicant (Printed)**

Commonwealth of Virginia  
County of \_\_\_\_\_, to wit:  
  
Sworn and subscribed to before me a Notary Public in and for the jurisdiction aforesaid by \_\_\_\_\_, whose name is signed to the above, on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

<b>Notary Public</b>		<b>Seal</b>
<b>Commission Expires</b>		
<b>Notary Number</b>		

**Ownership Disclosure**

List below the names and addresses of all owners or parties in interest of the land subject to this request.  
 If this request is in the name of a corporation, artificial person, joint venture, trust, or other form of ownership, all officers, directors, and any stock holders owning ten percent or more of such stock must be listed.

Name	Address

I, \_\_\_\_\_, do hereby swear and affirm to the best of my knowledge and belief, the above information is true and that I am the applicant requesting a variance or appeal hearing before the Board of Zoning Appeals for Tax Map \_\_\_\_\_.  
 If the information listed above changes at any time while this request is being considered, I will provide Powhatan

<b>Signature of Applicant</b>	
<b>Name of Applicant (Printed)</b>	

Commonwealth of Virginia  
 County of \_\_\_\_\_, to wit:  
 Sworn and subscribed to before me a Notary Public in and for the jurisdiction aforesaid by \_\_\_\_\_, whose name is signed to the above, on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

<b>Notary Public</b>		<b>Seal</b>
<b>Commission Expires</b>		
<b>Notary Number</b>		

**Consent of Owner(s) to Permit Request**

If the applicant is not the owner, the applicant must provide written documentation that the current property owner consents to this application requesting a variance or appeal hearing before the Board of Zoning Appeals application.

I, \_\_\_\_\_, am the owner of the property subject to this request and consent to the request submitted by \_\_\_\_\_ (Applicant) for a variance or appeal regarding \_\_\_\_\_ (Variance or Appeal Request) on Tax Map \_\_\_\_\_.

<b>Signature of Owner</b>	
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<b>Name of Owner (Printed)</b>	
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Commonwealth of Virginia  
 County of \_\_\_\_\_, to wit:  
 Sworn and subscribed to before me a Notary Public in and for the jurisdiction aforesaid by \_\_\_\_\_, whose name is signed to the above, on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

<b>Notary Public</b>		<b>Seal</b>
<b>Commission Expires</b>		
<b>Notary Number</b>		

<b>Applicant's Permission for Inspection of Property</b>		
<p>I, _____, hereby grant access to the Director of Community Development, Zoning Administrator, or assigns thereof, to enter my property during reasonable hours without prior notice to make inspections as deemed necessary for the evaluation of my application.</p>		
<b>Signature of Applicant</b>		
<b>Name of Applicant (Printed)</b>		
<p>Commonwealth of Virginia  County of _____, to wit:</p> <p>Sworn and subscribed to before me a Notary Public in and for the jurisdiction aforesaid by _____, whose name is signed to the above, on this _____ day of _____ 20_____.</p>		
<b>Notary Public</b>		<b>Seal</b>
<b>Commission Expires</b>		
<b>Notary Number</b>		

**Review Checklist  
(For Office Use Only)**

This form will be completed by the Department of Community Development as the application is reviewed.

Action	Date of Action	
Application Submitted		
Application Deemed Complete		
Application Routed to Reviewing Agencies		
Comments Received from Reviewing Agencies	Building Inspections	
	Environmental	
	Public Works	
	Sheriff	
	Fire	
	Health	
	Transportation	
	Other	
Notice in Newspaper		
Letters Sent to Adjoining Property Owners		
Board of Zoning Appeals: Hearing		
Board of Zoning Appeals: Decision		