



Application and Checklist for

SPECIAL EXCEPTION

**King George County
Department of Community
Development**

10459 Courthouse Drive, Suite 104
King George, VA 22485

Office: (540) 775-7111
Fax: (540) 775-3139

www.kinggeorgecountyva.gov

SPECIAL EXCEPTION APPLICATION

This application and checklist should be used to apply for a use that requires the approval of a Special Exception. Article 6, *Use Matrix*, of the Zoning and Subdivision Ordinance contains a matrix of uses, indicating when a Special Exception is required.

Please be advised that applicants are required to schedule a meeting with the Community Development Office prior to submitting a complete application. During this meeting the applicant may submit Concept Plans for preliminary review, comment, and recommendation by the Zoning Administrator or Agent, and other Development Committee members. Meetings can be scheduled by calling the Community Development Director at (540) 775-8550.

- The following items are included within this packet:
 - Checklist
 - Application
 - Certification of Real Estate Tax Payment Form
 - Ownership Disclosure Affidavit
 - Adjacent Property Owner List
- Upon written request by an applicant, the Zoning Administrator or Agent may waive or modify a submission requirement(s) upon a determination that the information is not necessary to evaluate the merits of the application. Such waivers or modifications are for application requirements only and do not include variances or modifications from district or use standards.
- Additional application information may be required as deemed necessary by the Zoning Administrator or Agent.
- Once your application has been received by the Community Development Office, the Special Exception application will be processed in the following manner:
 - The Zoning Administrator or Agent shall review the application for compliance with the Zoning Ordinance.
 - Once reviewed and determined a complete application, it is submitted to the Planning Commission, who makes a recommendation to the Board of Supervisors. However, upon written request by the applicant, the request may be taken directly to the Board of Supervisors for review and the Board of Supervisors may determine if Planning Commission review and recommendation is warranted.
 - The Board of Supervisors may grant the approval of a Special Exception Permit after the proper notification and public hearing process.
- Regularly scheduled meetings for the King George County Planning Commission and Board of Supervisors are as follows:
 - Planning Commission – Second Tuesday of every month
 - Board of Supervisors – First and Third Tuesday of every month

SPECIAL EXCEPTION APPLICATION CHECKLIST

Applicant	KGZO Section	Checklist Key: <input type="checkbox"/> =Yes <input checked="" type="checkbox"/> =No N/A= Not applicable	Staff
		6 copies of a Concept Plan with original submittal (15 copies will be required once deemed complete), showing the following:	
<input type="checkbox"/>	Section 3-4-3 (B)	1. A certified plat of the subject property showing metes and bounds of all property lines, existing streets, and subdivisions;	<input type="checkbox"/>
<input type="checkbox"/>	Section 3-4-3 (B)	2. Topography as shown by contour lines with a contour interval of not more than five feet;	<input type="checkbox"/>
<input type="checkbox"/>	Section 3-4-3 (B)	3. Proposed land uses to be developed;	<input type="checkbox"/>
<input type="checkbox"/>	Section 3-4-3 (B)	4. The general layout, orientation, and information describing buildings and improvements, including but not limited to parking, landscaping, fencing, signs, and trash enclosures, height, setbacks, and restriction lines;	<input type="checkbox"/>
<input type="checkbox"/>	Section 3-4-3 (B)	5. Approximate total number, density, type, and price range of dwelling units and the range of lot sizes for the various dwelling types (<i>if applicable</i>);	<input type="checkbox"/>
<input type="checkbox"/>	Section 3-4-3 (B)	6. General location of proposed open space and recreational areas (<i>if applicable</i>);	<input type="checkbox"/>
<input type="checkbox"/>	Section 3-4-3 (B)	7. General location and type of commercial uses to be developed (<i>if applicable</i>);	<input type="checkbox"/>
<input type="checkbox"/>	Section 3-4-3 (B)	8. General location and character of proposed roads, pedestrian circulation, trails, public utility, and storm drainage systems;	<input type="checkbox"/>
<input type="checkbox"/>	Section 3-4-3 (B)	9. Statement on the proposed development schedule;	<input type="checkbox"/>
<input type="checkbox"/>	Section 3-4-3 (B)	10. Written analysis of the public facilities, roadway improvements, and public utilities that will be required to serve the development;	<input type="checkbox"/>
<input type="checkbox"/>	Section 3-4-3 (B)	Any additional information as deemed reasonable necessary by the Administrator or Agent.	<input type="checkbox"/>
<input type="checkbox"/>	Section 3-4-3 (B)	Noise analysis (<i>Only applicable to Industrial Uses</i>) prepared by a qualified member of the Acoustical Society of America (ASA), a Board Certified member of the Institute of Noise Control Engineering (INCE), or other credentialed professional as approved by the Zoning Administrator.	<input type="checkbox"/>
<input type="checkbox"/>		Certification of Real Estate Tax Payment Form	<input type="checkbox"/>
<input type="checkbox"/>		Ownership Disclosure Affidavit	<input type="checkbox"/>
<input type="checkbox"/>		Adjacent Property Owner List	<input type="checkbox"/>
<input type="checkbox"/>		Application Deposit	<input type="checkbox"/>

SPECIAL EXCEPTION APPLICATION

APPLICANT INFORMATION:

Name:		
Mailing Address:		
City:	State:	Zip Code:
Phone (Business):	Phone (Home):	
Email:		
Application Deposit*(due with 1 st submittal): \$	Date Paid:	
Application Fee*(due with 2 nd submittal): \$	Date Paid:	

*These fees are non-refundable, as they are used to cover advertisement costs and staff hours.

PROPERTY OWNER INFORMATION (if different from applicant):

Name:		
Mailing Address:		
City:	State:	Zip Code:
Phone (Business):	Phone (Home):	
Email:		

PROPERTY DESCRIPTION:

Proposed Use of Property:		
Tax Map:	Parcel:	Zoning:
Address or Location of Property:		
Acreage or Lot Size:		
Future Land Use Map Designation (found in Comprehensive Plan):		
Current Use of Property:		
Water: <input type="checkbox"/> Public <input type="checkbox"/> Private	Sewage: <input type="checkbox"/> Public <input type="checkbox"/> Private	

ADDITIONAL INFORMATION:

Please respond to the following questions regarding the proposed Special Exception use (use additional sheets if necessary).

1. What is the reason for and nature of this special exception?

2. Proposed hours of operation:

3. Will it be necessary to maintain outside storage?

4. Does screening currently exist or is it proposed? If proposed, please describe the type(s) of screening.

5. How many off-street parking spaces will be provided on the premises?

6. What is the anticipated volume of daily traffic?

7. Will there be impacts to the neighborhood or adjacent properties such as, but not limited to, noise, light, dust, fumes, vibration? If so, what are the proposed measures to reduce impacts (use additional sheets if necessary)?_____



I hereby certify that I have the authority to make this application, that the information is true and correct, and the proposed use will conform to all Federal, State, and County Laws/Ordinances, and that all permits required by these Laws/Ordinances will be obtained from the proper authority. I further grant the right-of-way onto this property to the designated personnel of King George County for the purpose of conducting site visits related to this application.

Additionally, I hereby certify that the contents of the ownership affidavit are true and correct to the best of my knowledge, information, and belief. In the event the ownership of the involved real estate changes during the time the application is closing, I shall make complete disclosure of the new equitable ownership of the real estate involved in the application.

Property Owner Signature

Date

Signed and acknowledged before me by
_____ in the county of _____
_____, ____ this ____
day of _____, ____.

My commission expires:

Notary Public

Agent/Applicant Signature

Date

Signed and acknowledged before me by
_____ in the county of _____
_____, ____ this ____
day of _____, ____.

My commission expires:

Notary Public

Each property owner must print and sign/notarize a separate page.

10459 Courthouse Drive
Suite 104
King George, VA 22485
(540) 775-7111



FOR OFFICE USE ONLY:

Application Date: _____

Case Number: _____

Public Hearing Date: _____

CERTIFICATION OF REAL ESTATE TAX PAYMENT

In accordance with Section 2-6-1 of the King George County Zoning and Subdivision Ordinance:

Pursuant to the Code of Virginia § 15.2-2286 (B), as amended, prior to the initiation of an application by the owner of the subject property, the owner's agent, or any entity in which the owner holds an ownership interest greater than 50%, for a Special Exception, Variance, Rezoning, or other land disturbing permit, including Building Permits and Erosion and Sediment Control Permits, or prior to the issuance of final approval, the authorizing body may require the applicant to produce satisfactory evidence that any delinquent real estate taxes, nuisance charges, stormwater management utility fees, and any other charges that constitute a lien on the subject property, that are owned to the locality and have been properly assessed against the subject property, have been paid, unless otherwise authorized by the treasurer. Upon receipt of an application, together with supplementary materials and payment of the application fee and provision of proof that all outstanding payments set forth in this section have been paid and satisfied. The Zoning Administrator or Agent may waive this requirement for reasons of health, safety, or public welfare, provided that the applicant or owner has entered into a plan with the County Treasurer to pay all delinquent taxes, fees and charges as set for the in this Ordinance.

Tax Map # _____

Property Owner Name: _____

I certify that Real Estate Taxes have been paid in full for the above referenced property, as required by Section 2-6-1 of the King George County Zoning and Subdivision Ordinance.

Property Owner/Applicant Signature: _____

King George County Treasurer Staff Name: _____

King George County Treasurer Verified Date: _____

OWNERSHIP DISCLOSURE AFFIDAVIT

In accordance with Section 3-1-4 of the King George County Zoning and Subdivision Ordinance and Code of Virginia § 15.2-2289, as amended, any applicant for a special exception, conditional use, text or map amendment, or variance shall make complete disclosure of the equitable ownership of the real estate involved in the application. In all cases, the names and addresses of all real parties of interest must be provided. In the case of corporate ownership, the name of stockholders, officers, and directors must be provided. The requirement of listing stockholder names, officers and directors shall not apply to a corporation whose stock is traded on a national or local stock exchange and has more than 500 shareholders. In the case of a condominium, the requirement shall only apply to the title owner, contract purchaser, or lessee if they own 10% or more of the units in the condominium.

1. Type of Application:

☐ Rezoning ☐ Conditional Use ☐ Special Exception ☐ Variance

2. List all equitable ownership as required by Code of Virginia § 15.2-2289 and stated above. (Use additional sheets if necessary)

Name of Owners	Address

3. Have all individuals listed on this disclosure form been notified of the purpose of this application?

☐ Yes ☐ No

10459 Courthouse Drive
Suite 104
King George, VA 22485
(540) 775-7111



FOR OFFICE USE ONLY:

Application Date: _____

Case Number: _____

Public Hearing Date: _____

DEVELOPER NOTIFICATION AFFIDAVIT

Owner/Applicant Name: _____

I hereby certify that the following requirements of Section 3-10-2, Advertisement and Mailings, and Section 3-10-3, Posting Notice on Property, of the Zoning and Subdivision Ordinance have been completed (check all that apply):

- ☐ Posting signage on the property
- ☐ Adjacent property owner notification mailings

Date that certified mail was sent: _____

Date of posted signage: _____

Number of signs posted: _____ Location of signage: _____

Owner/Applicant Signature

Date

Commonwealth of Virginia, County of _____, to Wit: _____

Sworn and subscribed before me this _____ day of _____, 20____.

My commission expires:

Notary Public

List of Adjacent Property Owners

The applicant is required to provide a list of all owners as shown on the current real estate tax assessment books of all adjacent properties, including properties across any road, railroad right-of-way or body of water. Provide additional pages if needed.

Property Owner Name:	
Mailing Address:	
Tax Map:	Parcel:

Property Owner Name:	
Mailing Address:	
Tax Map:	Parcel:

Property Owner Name:	
Mailing Address:	
Tax Map:	Parcel:

Property Owner Name:	
Mailing Address:	
Tax Map:	Parcel:

Property Owner Name:	
Mailing Address:	
Tax Map:	Parcel: