

Board of Zoning Appeals Application



Application Instructions

Please provide the following items and information requested in the checklist below along with the application found on pages 3-4.

Once your application and supporting materials have been submitted to the Department of Planning and Community Development, you will be contacted by the Zoning Office staff assigned to the project who will assist you and/or your representative during the process.

A summary of the Board of Zoning Appeals process is provided on the following page. If you have any questions regarding the process or the requests for information, please contact the Zoning Office at (757) 385-8074 or by email at bza@vbgov.com.

Additional information about the Board of Zoning Appeals process and procedures can be found at www.vbgov.com/zoning.

Application Checklist

- Application**
- Property owner's signature and applicant's signature**
Note: A copy of the purchase contract for the property may be included in lieu of the property owner's signature if the contract clearly identifies approval of the application as a contingency of the contract.
- Disclosure Statement**
- Fee payable to "Treasurer, City of Virginia Beach"**
 - \$400 fee for residential application (Includes Public notice, certified mailing to adjacent property owners, and public notice signs) - or -
 - \$500 fee for commercial application (Includes Public notice, certified mailing to adjacent property owners, and public notice signs)
- Property survey** (Unless concept plan includes current survey information)
- Proposed concept plan** including:
 - Scale, dimensions of lot
 - Applicable information related to: topography, natural features, adjacent land uses, and open space areas; existing and proposed structures, setbacks, parking spaces, drive aisles, sidewalks, freestanding signs, vehicular access points, plant material, etc.
- Proposed renderings and/or building elevations** including:
 - Scale identified
 - Exterior building materials and color schemes
 - Location and depiction of sign(s) to be attached to the building
- Sworn statement from property owner** (If property owner will not be present at the hearing)

Board of Zoning Appeals Process

Purpose: The Board of Zoning Appeals is a 7-member body with 2 alternate members, appointed by City Council, responsible for the review of variance requests to the Zoning Ordinance and appeals of decisions of the zoning Administrator for the City of Virginia Beach.

Step 1 Application Submitted <i>2 to 3 months prior to hearing date</i>	<ul style="list-style-type: none">•Application submitted in-person at the Department of Planning and Community Development or via Accela
Step 2 Application Review <i>Up to 60 days</i>	<ul style="list-style-type: none">•Application assigned to a Staff planner and reviewed by City departments (Public Works, Public Utilities etc.)•Staff formulates a report for Board of Zoning Appeal's consideration
Step 3 Public Notice <i>14 days (concurrent with Application Review)</i>	<ul style="list-style-type: none">•Notification signs posted on the subject property by the applicant 30 days prior to the public hearing•City mails notification letters to all adjacent property owners•City advertises the request in the Virginian-Pilot Beacon twice and on the City website
Step 4 Board of Zoning Appeals Public Hearing <i>1st Wednesday of every month</i>	<ul style="list-style-type: none">•Application considered by Board of Zoning Appeal at the public hearing, 1:00 pm informal, 2:00 pm formal hearing•Board reviews Staff's report•Members of the public have the opportunity to voice their opinions at the hearing•Board of Zoning Appeal votes to approve, deny or defer the application
Step 5 Appeals Period <i>30 days</i>	<ul style="list-style-type: none">•If the application is denied. The Applicant has 30 days to appeal the Board of Zoning Appeal's decision.
Step 6 Decision Letter <i>Typical total time: 120 days</i>	<ul style="list-style-type: none">•Results of the Board Zoning Appeal decision are forwarded to the applicant, property owner and representative

Board of Zoning Appeals Application



Date Submitted _____

Contact Information

Applicant's Name _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Applicant's Representative _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Property Owner's Name _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Property Information

Address or Location _____

GPIN(s) _____

Land area (acres or square feet) _____ City Council Election District _____

Existing Zoning _____ Overlay District Yes No (If yes, specify _____)

Strategic Growth Area (SGA) Yes No (If yes, specify _____)

AICUZ _____ Watershed _____

Lot number _____ Block _____ Subdivision _____

Board of Zoning Appeals Use Only

Approved Date: _____

Conditions: Yes _____ No _____

Denied Date: _____

Chairman Signature

Board of Zoning Appeals Application



Criteria for Variance Approval

Section 15.2-2309 of the Code of Virginia states that the Board of Zoning Appeals shall not approve a variance unless it finds:

- a. That the strict application of the ordinance would produce an undue hardship.
- b. That such hardship is not shared generally by other properties in the same zoning district and the same vicinity.
- c. That the authorization of such variance will not be of substantial detriment to adjacent property and the character of the district will not be changed by the granting of this variance.
- d. That the granting of the variance is in harmony with the intended spirit and purpose of the ordinance.

Description of Hardship *(attach additional sheets if necessary)*

Please describe the hardship, how the ordinance prohibits or restricts use of the property, any unique topographic, size or shape features of the lot, why the proposal is in the character of the neighborhood, and how the request meets the spirit of the code section you wish to vary.

Description of Variance Request *(attach additional sheets if necessary)*

Description of the Project and Proposed Improvements *(attach additional sheets if necessary)*

I/WE CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND CORRECT.

Signature of Property Owner or Representative

Signature of Condo/co-owner

APPLICANT'S NAME _____

DISCLOSURE STATEMENT FORM

The completion and submission of this form is required for all applications that pertain to City real estate matters or to the development and/or use of property in the City of Virginia Beach requiring action by the City Council or a board, commission, or other body appointed by the City Council. Such applications and matters include, but are not limited to, the following:

Acquisition of Property by City	Disposition of City Property	Modification of Conditions or Proffers
Alternative Compliance, Special Exception for	Economic Development Investment Program (EDIP)	Nonconforming Use Changes
Board of Zoning Appeals	Encroachment Request	Rezoning
Certificate of Appropriateness (Historic Review Board)	Floodplain Variance	Street Closure
Chesapeake Bay Preservation Area Board	Franchise Agreement	Subdivision Variance
Conditional Use Permit	Lease of City Property	Wetlands Board
	License Agreement	

The disclosures contained in this form are necessary to inform public officials who may vote on the application as to whether they have a conflict of interest under Virginia law.

SECTION 1 / APPLICANT DISCLOSURE

FOR CITY USE ONLY / All disclosures must be updated two (2) weeks prior to any Planning Commission and City Council meeting that pertains to the application(s).			
<input type="checkbox"/>	APPLICANT NOTIFIED OF HEARING	DATE:	
<input type="checkbox"/>	NO CHANGES AS OF	DATE:	
<input type="checkbox"/>	REVISIONS SUBMITTED	DATE:	

- Check here if the **APPLICANT IS NOT** a corporation, partnership, firm, business, or other unincorporated organization.
- Check here if the **APPLICANT IS** a corporation, partnership, firm, business, or other unincorporated organization.

(A) List the Applicant's name: _____
If an LLC, list all member's names:

If a CORPORATION, list the the names of all officers, directors, members, trustees, etc. below: *(Attach list if necessary)*

(B) List the businesses that have a parent-subsiary¹ or affiliated business entity² relationship with the Applicant: *(Attach list if necessary)*

See next page for information pertaining to footnotes¹ and ²

SECTION 2 / PROPERTY OWNER DISCLOSURE

Complete Section 2 only if property owner is different from Applicant.

- Check here if the **PROPERTY OWNER IS NOT** a corporation, partnership, firm, business, or other unincorporated organization.
- Check here if the **PROPERTY OWNER IS** a corporation, partnership, firm, business, or other unincorporated organization, **AND THEN**, complete the following.

(A) List the Property Owner's name: _____
If an LLC, list the member's names:

If a Corporation, list the names of all officers, directors, members, trustees, etc. below: *(Attach list if necessary)*

- (B) List the businesses that have a parent-sub subsidiary¹ or affiliated business entity² relationship with the Property Owner: *(Attach list if necessary)*

¹ "Parent-sub subsidiary relationship" means "a relationship that exists when one corporation directly or indirectly owns shares possessing more than 50 percent of the voting power of another corporation." See State and Local Government Conflict of Interests Act, Va. Code § 2.2-3101.

² "Affiliated business entity relationship" means "a relationship, other than parent-sub subsidiary relationship, that exists when (i) one business entity has a controlling ownership interest in the other business entity, (ii) a controlling owner in one entity is also a controlling owner in the other entity, or (iii) there is shared management or control between the business entities. Factors that should be considered in determining the existence of an affiliated business entity relationship include that the same person or substantially the same person own or manage the two entities; there are common or commingled funds or assets; the business entities share the use of the same offices or employees or otherwise share activities, resources or personnel on a regular basis; or there is otherwise a close working relationship between the entities." See State and Local Government Conflict of Interests Act, Va. Code § 2.2-3101.

SECTION 3. SERVICES DISCLOSURE

Are any of the following services being provided in connection with the subject of the application or any business operating or to be operated on the Property. If the answer to any item is YES, please identify the firm or individual providing the service: IF THE OWNER AND APPLICANT ARE DIFFERENT, EACH MUST COMPLETE THE SECTION SEPERATELY

APPLICANT

YES	NO	SERVICE	PROVIDER (use additional sheets if needed)
<input type="checkbox"/>	<input type="checkbox"/>	Accounting and/or preparer of your tax return	
<input type="checkbox"/>	<input type="checkbox"/>	Architect / Landscape Architect / Land Planner	
<input type="checkbox"/>	<input type="checkbox"/>	Contract Purchaser (if other than the Applicant) - identify purchaser and purchaser's service providers	
<input type="checkbox"/>	<input type="checkbox"/>	Any other pending or proposed purchaser of the subject property (identify purchaser(s) and purchaser's service providers)	
<input type="checkbox"/>	<input type="checkbox"/>	Construction Contractors	
<input type="checkbox"/>	<input type="checkbox"/>	Engineers / Surveyors/ Agents	
<input type="checkbox"/>	<input type="checkbox"/>	Financing (include current mortgage holders and lenders selected or being considered to provide financing for acquisition or construction of the property)	
<input type="checkbox"/>	<input type="checkbox"/>	Legal Services	
<input type="checkbox"/>	<input type="checkbox"/>	Real Estate Brokers / Agents/Realtors for current and anticipated future sales of the subject property	

SECTION 4. KNOWN INTEREST BY PUBLIC OFFICIAL OR EMPLOYEE

YES	NO	Does an official or employee of the City of Virginia Beach have an interest in the subject land or any proposed development contingent on the subject public action?
<input type="checkbox"/>	<input type="checkbox"/>	

If yes, what is the name of the official or employee and what is the nature of the interest?

CERTIFICATION:

I certify that all of the information contained in this Disclosure Statement Form is complete, true, and accurate.

I understand that, upon receipt of notification that the application has been scheduled for public hearing, I am responsible for updating the information provided herein two weeks prior to the Planning Commission, Council, VBDA meeting, or meeting of any public body or committee in connection with this Application.

APPLICANT'S SIGNATURE	PRINT NAME	DATE

OWNER

YES	NO	SERVICE	PROVIDER (use additional sheets if needed)
<input type="checkbox"/>	<input type="checkbox"/>	Accounting and/or preparer of your tax return	
<input type="checkbox"/>	<input type="checkbox"/>	Architect / Landscape Architect / Land Planner	
<input type="checkbox"/>	<input type="checkbox"/>	Contract Purchaser (if other than the Applicant) - identify purchaser and purchaser's service providers	
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PROPERTY OWNER'S SIGNATURE	PRINT NAME	DATE