

Town of Accomac

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PO Box 21
23367 Front Street
Accomac, Virginia 23301
(757) 789-5171 (office & fax)

APPLICATION FOR REZONING

I/we, the undersigned, do hereby respectfully make application and petition the Governing Body to amend the Zoning Ordinance and to change the Zoning Map as hereinafter requested, and in support of this application, the following facts are shown:

Tax Map Number	
Property Address	
Frontage Feet	
Depth Feet	
Property Owner(s)	
Date Property Acquired	
Deeded From	
Instrument #	
Deed Book #	
Page Number #	
Currently Zoned	
Requested Rezoned To	

The following are the adjacent to both sides and the rear and the property across the street from the property sought to be rezoned:

Property Owner(s)	Property Address

It is proposed that the property will be put to the following use:

It is proposed that the following buildings will be constructed:

It is proposed that the following setbacks and off-street parking provisions will be made:

Attached is a copy of the vicinity map.

Signature of Applicant

Address of Applicant

TO THE TOWN COUNCIL OF THE TOWN OF ACCOMAC, VIRGINIA:

This petition for rezoning property within the jurisdiction of the Town of Accomac was received on _____, a public hearing was held on _____, and the Planning Commission makes the following recommendations to the Town Council:

PLANNING COMMISSION

BY: SECRETARY

APPLICATION FEE \$ _____

PAID BY: cash money order check # _____

ACTION OF THE TOWN COUNCIL:

On _____ the Governing Body took the following action on the application for rezoning: