



**Gloucester County
Administrator's Office**

Telephone 804-824-2458

P. O. Box 329, Gloucester, Virginia 23061

Fax 804-693-6004

PRE-APPLICATION FOR FUTURE SITE PLAN SUBMITTAL

APPLICANT (ENGINEERING FIRM/CONTRACTOR/OWNER/OTHER):

Name of Individual Requesting Pre-Application Meeting	
Company Representing	
Street mailing address	City, State, Zip
Home/Business Contact # / Cell phone Contact #	Email address
/	

PROPERTY OWNER:

Name of property owner	
Street mailing address	City, State, Zip
Home/Business Contact # / Cell phone Contact #	Email address
/	

PROPERTY DESCRIPTION INQUIRING ON:

Street Address (E911)	
Legal description of property or recorded subdivision name	
RPC#	Tax Map #
Current Zoning of property	Is the property subject to: Proffered conditions of rezoning? A conditional use permit? Special Exception?
	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Rezoning application # Z- ____ - ____ Conditional Use Permit # Special Exception#

PROJECT INFORMATION:

Project Name	
Project Description	
Proposed structure:	<input type="checkbox"/> New Building <input type="checkbox"/> Alterations to existing Building <input type="checkbox"/> New accessory Structure <input type="checkbox"/> Other _____
Does this proposal have a total land disturbance of 2500 sq. ft. or greater? (Complete the section below titled "LAND DISTURBANCE" to answer this question)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will this proposal generate an additional 25 or more vehicular trips per day?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Does your proposed use require any new or modified access to a public road?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will this proposal affect traffic circulation?	<input type="checkbox"/> Yes <input type="checkbox"/> No

PROPOSED LAND DISTURBANCE:

How much land disturbance is required to accommodate the proposed structure/addition, etc. including:

Disturbance Required	Disturbance Not Required	Type of disturbance	Square footage of disturbance area
<input type="checkbox"/>	<input type="checkbox"/>	New structure and/or addition	
<input type="checkbox"/>	<input type="checkbox"/>	Accessible entrances/access ramps, Parking spaces (min 9'x18' each plus aisles), Water/sewer line construction, Utility trenching, Driveway(s), Septic drainfield construction/expansion, Other _____	
APPROXIMATE TOTAL AREA DISTURBED:			

NOTE: If you have checked “No” to all questions under “Project Information” please do not complete the below sections. Continue to the end of the application and sign and date it. Submit the application to the “Agent” to determine if a site plan is required. If you have checked “Yes” to one or all questions under “Project Information” please continue completing the below sections of the application.

PROPERTY USE:

Has a site plan previously been approved for this site?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Date of original site plan approval _____ If yes, use identified on approved site plan: _____
Have any previous permits been approved?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a VDOT plan for any streets adjacent to this site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What is the square footage of the proposed structure, building addition, etc.?	
Does your proposal include demolition of any existing buildings or structures?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is being demolished? _____
What is the current use of the property?	
What is the proposed use of the new structure, addition, etc.?	Is this a permitted use in the current zoning district? <input type="checkbox"/> Yes <input type="checkbox"/> No

UTILITIES:

Is the site served by a septic system or public sewer?	<input type="checkbox"/> Septic <input type="checkbox"/> Public sewer
Will this new structure/addition require modifications to the existing septic/sewer service? (This can include items such as putting in a new system or expanding capacity of the existing septic, water lines for sprinkler service, or connection to the public sewer systems.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is this site served by public water or a well?	<input type="checkbox"/> Public Water <input type="checkbox"/> Well

OTHER REVIEWING AGENCIES:

Have any of the following agencies (Federal, State, etc.) been involved in prior reviews of this project?	
1. Army Corps of Engineers (Ex. For a wetland preliminary jurisdictional determination), DCR, DEQ, VDOT, Health Department, Other _____ If you checked yes, please list the organization(s) and describe their involvement _____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Attach a plot plan drawn to scale of not less than 1" = 100' of the proposal, which includes the area of total land disturbance calculated and shown in square feet.

I attest that all information contained in this application is accurate and thorough. I further understand that there may be additional requirements that must be met in accordance with local building codes, zoning ordinances, and state codes even in the event that a site plan submission is/isn't required.

 Applicant Signature _____ Date

OFFICE USE ONLY:

<input type="checkbox"/> Site plan submission required <input type="checkbox"/> Site plan submission not required Comments from staff: _____ _____ _____ Reviewed by: _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Signature/Title Date </div>
