



TOWN OF OCCOQUAN
314 Mill Street, PO Box 195
Occoquan, VA 22125
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www.occoquanva.gov

Zoning Review Application

FOR TOWN USE ONLY			
Zoning Permit No.:	Issue Date:	Zoning Official:	
SECTION 1: APPLICANT AND OWNER INFORMATION			
APPLICANT INFORMATION		OWNER INFORMATION	
Applicant Name _____	Owner Name _____		
Business Name (if applicable) _____	Address (No., City, Address, Zip) _____		
Address (No., City, Address, Zip) _____	Email _____		
Email _____	Phone No.: _____		
Phone No.: _____			
SECTION 2: ZONING ACTIVITY			
<input type="checkbox"/> New Construction	<input type="checkbox"/> Alteration/Repair	<input type="checkbox"/> Addition	
<input type="checkbox"/> New Tenant/Use	<input type="checkbox"/> Change of Use	<input type="checkbox"/> Other _____	
Proposed Use and/or Improvements:		Size (Sq. Ft./Length) of Construction:	
SECTION 3: SITE INFORMATION			
Site Address:		Parcel No.:	
Subdivision Name:		Lot Size:	
Zoning District: <input type="checkbox"/> R-1 <input type="checkbox"/> R-2 <input type="checkbox"/> R-3 <input type="checkbox"/> R-4 <input type="checkbox"/> B-1 <input type="checkbox"/> PPU	PWC GPIN:	Use:	
Special Use Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No		HOA Approval? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Historic District: <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(NOTE: ARB Approval for exterior modifications and signage is required for activities located within the Historic District.)</i>	RPA on Site: <input type="checkbox"/> Yes <input type="checkbox"/> No	IDA: <input type="checkbox"/> Yes <input type="checkbox"/> No	Site Plan Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Supporting Documentation (Attached): <input type="checkbox"/> Plan/Plat <input type="checkbox"/> Narrative <input type="checkbox"/> Specification Sheet <input type="checkbox"/> Other: _____ Please ensure all exhibits are drawn to scale.			
SECTION 4: NOTICES TO APPLICANT/PROPERTY OWNER			
Prior to construction and/or installation of improvements, it is your responsibility to determine the existence of any restrictive covenants and/or deed restrictions governing property improvements. In some cases, such covenants may be more restrictive than the Occoquan Town Code, and the issuance of permits will not relieve you of complying with any			

applicable private restrictions. We recommend that you contact your Home/Business Owners Association to determine the existence and applicability of any such covenants.

Additionally, it is the responsibility of the applicant/owner to obtain permission from applicable easement holders before placing any structure within an established easement.

Please note that any changes to the exterior of buildings and/or properties located within the Historic District require approval by the Architectural Review Board prior to work beginning. The ARB meets on the second Tuesday of each month; applications are due to Town Hall by noon on the Wednesday before a scheduled meeting. It is the responsibility of the applicant/owner to apply for ARB approval through Town Hall PRIOR to installing any exterior modifications as requested in this zoning request.

INFORMATION PROVIDED BY THE APPLICANT/OWNER ON BUSINESS LICENSE APPLICATIONS, SITE PLANS, PLATS, RELATED DOCUMENTS, VERBALLY OR WRITTEN SHALL BE ASSUMED TO BE TRUE AND ACCURATE (I.E. PROPOSED/EXISTING USES & STRUCTURES, SETBACKS, EASEMENTS, ETC.) **IF INFORMATION PROVIDED IS INACCURATE, INCOMPLETE OR OTHERWISE MISREPRESENTED, THIS APPROVAL WILL BE CONSIDERED NULL & VOID.**

Applicant/Property Owner Signature

Authorized Signature

Date

FOR TOWN USE ONLY

Date Filed:

Fee Amount:

Check/Receipt No.:

Date Paid:

**Date to Zoning
Administrator:**

Approved Disapproved

Signature (ZA)

Date

Conditions:

**Date to Architectural
Review Board:**

Approved Disapproved

Signature

Date

Conditions:

NOTES