

**Spotsylvania County
Comprehensive Plan Amendment**

Case: _____ Date _____

Fee: \$57.50

Planning: 110-0000-316-16-08-395 (\$1000)

Code: 110-0000313-03-07-017 (\$55)

**Comprehensive Plan Text/Map Amendment(s)
Initiation Request Form**

A. Applicant Information

1. Name: _____

2. Project Name: _____

3. Mailing Address of Applicant: _____

4. Telephone Number: _____

5. Property owner(s) if different than applicant: _____

B. Legal interest in the property affected or reason for the request:

C. Comprehensive plan text and/or map designation that is the subject of the request:

D. Proposed Comprehensive Plan Amendment (enclose language/graphics/maps as necessary):

1. Map Amendment:

a. Tax Map Number: _____

b. Parcel Size: _____

c. Comprehensive Plan District: _____

d. Existing Zoning and Land Use of the Subject Property: _____

e. Describe (using text, photos, and maps as necessary) the existing zoning, land use, and Comprehensive Plan District within:

1. ¼ mile from parcel(s) if the parcel is less than 20 acres in size;
2. ½ mile if 21-100 acres in size; or
3. 1 mile if more than 100 acres in size.

Description should include areas, densities, and other information and planned characteristics of the area.

f. The name, mailing address, and parcel number of all property owners within 200 ft. of the parcel in question.

2. Text Amendment:

- a. Text to be amended (cite Plan chapter, goal, objective and/or policy)
- b. Proposed new text.

(Note: Please attach and specify text changes in legislative draft format, i.e., additions underlined and deletions crossed through.)

E. Is the Subject Plan Component Applicable Countywide? Yes ___ No ___

F. Justification of Proposed Comprehensive Plan Amendment (provide attachments if necessary):

1. Why is the Change to the Comprehensive Plan Being Proposed?

G. What Zoning Will be Requested if the Amendment is Approved? (For Comprehensive Plan map amendment requests only.) _____

H. Demonstrate How the Proposal Furthers the Goals, Objectives, Policies or Implementation Strategies set forth in the Comprehensive Plan Chapter(s) Relative to the Amendment Request and Why the Proposed Revisions are appropriate. (For Comprehensive Plan text requests only.)

I. Demonstrate how the Proposal is Consistent with other Comprehensive Plan Components that are not the Subject of this Amendment. (For Comprehensive Plan text requests only.)

J. What Public-Based Fiscal Impacts , if any, are Associated with the Request? (For Comprehensive Plan text requests only.)

K. How Will the Resultant Changes Impact or Benefit Spotsylvania County Relative to an Improvement in:

- a. Cultural and Historic Resources
- b. Economic Development and Job Creation
- c. Environment
- d. Fire and Rescue
- e. Housing
- f. Land Use
- g. Libraries
- h. Parks and Recreation
- i. Potable Water
- j. Schools
- k. Sewer

- l. Telecommunications
 - m. Transportation
 - n. Corridor/Area Plan (if applicable)
- L. Other Information as may be Required by the Director of Planning, the Planning Commission, or the Board of Supervisors During the Review of the Initiation Request. The Applicant will be Notified, in Writing, about the additional information.
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M. To: The Board of Supervisors of Spotsylvania County, Virginia. The above named owner(s) hereby petition(s) for the approval indicated above for the described property and as shown on any attachment made a part of this application and certifies that the information provided is correct.
SIGNATURES OF OWNER(S) OR AGENT AND DATE:
