



# Preliminary Review Meeting Request Form

## Rezoning/Provisional Use Permits

County of Henrico, Virginia

4301 E. Parham Road, Henrico, Virginia 23228

Henrico Planning Web Site: [www.co.henrico.va.us/planning](http://www.co.henrico.va.us/planning)

Mailing Address: Planning Department, P.O. Box 90775, Henrico, VA 23273-0775

Phone (804) 501-4602

Facsimile (804) 501-4379

### 1. Contact Person:

Name:		Address:	
Telephone:	Fax:	Email:	

Relation to subject property:  Owner  Contract Purchaser  Other: \_\_\_\_\_

### 2. Subject Property Description:

Location: <i>(Describe in relation to nearest intersection)</i>		
Address: <i>(if applicable)</i>	Existing Zoning:	Acreage:
GPIN(s):		Property Owner(s):
Existing Use: <i>(If proposal is commercial/office redevelopment – please include square footage and specific use of existing buildings)</i>		

### 3. Provisional Use Permits (PUPs) and Amendment to Proffers

For Provisional Use Permit: <i>(List applicable County Code Sections):</i>
Proposed Proffer Amendment: <i>(List applicable proffers and rezoning case number):</i>

For Regular Rezoning, PUP or Amendment to Proffer requests, completion of Section 4.B. is not mandatory UNLESS the request increases existing square footage or adds additional uses (i.e. adding fuel pumps) or number of units. For Regular Rezoning applications, uses permitted within the proposed district with the highest traffic trip generation will be assumed.

### 4. Description of Proposed Development and Uses: *The requested information below MUST be submitted*

A. Proposed Zoning Districts <i>(Please list proposed zoning districts and acreage of each District below):</i>
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#### B. Proposed Uses *(check all that applies):*

<input type="checkbox"/> Residential Total Single Family # of Units: _____  Total Multi-Family # of Units: _____  <input type="checkbox"/> Commercial Use _____ S.F. _____ Use _____ S.F. _____ Use _____ S.F. _____	<input type="checkbox"/> Mixed Use <i>(Residential and commercial uses within same building)</i>  Total # of Units: _____  Commercial uses Use _____ S.F. _____ Use _____ S.F. _____ Use _____ S.F. _____
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5. Requested Meeting Date & Time \_\_\_\_\_ Staff Signature: \_\_\_\_\_

**FOR INTERNAL STAFF USE ONLY**

**VDOT Requirements**

In accordance with the Code of Virginia §15.2-2222.2 and 24 VAC 30-155, the project:

- Will NOT require an application submission to be reviewed by VDOT.
- Will require a Traffic Impact Analysis (TIA) submission and review by VDOT. TIA must be submitted with rezoning application.
- Applicant will be required to coordinate a Scope of Work Meeting with VDOT (Project will generate 1,000 or more vehicle trips per peak hour.)

(Traffic Engineer's Initials \_\_\_\_\_)

***This determination is based upon the information provided by the applicant on the submitted Preliminary Review Request Form. Determination is subject to change based upon changes to the request.***

Information and VDOT forms regarding the VDOT's Traffic Impact Analysis Regulations Administrative Guidelines can be obtained online at [www.virginiadot.org/projects/chapter527](http://www.virginiadot.org/projects/chapter527).

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- Elevations:** Two (2) paper copies reduced to 8 ½" x 11" of proposed buildings must be submitted in addition to an electronic copy in ".pdf" format.
  - Conceptual Plan:** A conceptual plan is necessary to show general locations and design of proposal, including but not limited to proposed buildings, lot layout, parking, buffers, and road network in relation to the adjacent properties. Two (2) paper copies reduced to 8 ½" x 11" must be submitted in addition to an electronic copy in ".pdf" format.
  - Documentation of Community Meeting.** Community meetings can be held after submitting application. County staff should be notified a least a week in advance of meeting date.
  - Title Report.** Title Reports must be conducted within the past six (6) months of application.
  - Traffic Impact Analysis (TIA) - County:** Based upon the proposed use and location, the project may substantially affect County maintained roadways and the County Traffic Engineering Division (Department of Public Works) may require a traffic impact analysis.
  - Other:**

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Applicant's Signature/Printed Name

Staff Signature (Planning)

Date

**This form is to verify completion of the required Preliminary Review Meeting and must be submitted at the time of filing of applications. Based upon the proposed development, County staff has determined the information checked on this form must be submitted in addition to regular submission requirements for Rezoning, Provisional Use Permit, or Amendment to Proffer Applications.**