



Zoning and Planning Office  
P.O. Box 179, Urbanna, VA 23175

Phone: 804-758-2613 Fax: 804-758-0389

## MINOR SUBDIVISION REVIEW SUBMISSION REQUIREMENTS

In order to expedite the review of Minor Subdivision applications, please be sure that all of the following items have been included in your Subdivision application. Please return this completed checklist with the application to assure that all items have been addressed. All Minor Subdivision applications must adhere to the regulations found in the Town of Urbanna Zoning Ordinance.

- Completed Subdivision application.
- Minor Subdivision application fee of \$100 per lot created.
- A minimum of three (3) copies of the subdivision plat. The plat must provide the following information:
  - a. The name of the subdivision, preparer of plat and owner of record.
  - b. The date of the drawing, scale and north point.
  - c. An insert map showing the location of the subdivision with reference to existing streets, watercourses and other landmarks.
  - d. The layout, boundaries, area and frontage of the parcel or tract to be subdivided.
  - e. The layout, boundaries, area and frontage of new lots to be created.
  - f. The location of existing and proposed streets. All proposed streets must meet the following requirements:
    - All proposed public streets must be designed in accordance with the Virginia Department of Transportation's Subdivision Street Requirements, January 1, 1996, as may be amended.
  - g. The location of all Chesapeake Bay Preservation Act features, including the Resource Protection Area (RPA) and Resource Management Area (RMA).
  - h. A statement to the effect that the subdivision as it appears on the plat is with the free consent and in accordance with the desires of the owners, proprietors and trustees, if any, with original

---

### SURVEYOR CERTIFICATION:

I hereby certify that the attached plats and this completed application form contain all the required information for a Minor Subdivision plat in accordance with the Town of Urbanna Subdivision Ordinance. I understand that the submission of incomplete or inaccurate information may delay the processing of this Minor Subdivision plat.

Surveyor \_\_\_\_\_ Contact Number: \_\_\_\_\_

\_\_\_\_\_  
Signature

Name \_\_\_\_\_  
Please Print

# TOWN OF URBANNA

Planning and Zoning Office  
P.O. Box 179, Urbanna, VA 23175  
Phone: 804-758-2613 Fax: 804-758-0389

## SUBDIVISION APPLICATION

### OFFICE USE ONLY

Application #: \_\_\_\_\_

Subdivision Classification/Fee:  Major (\$1500)  Minor (\$100 per lot): \_\_\_\_\_  
 Lot Line Vacation (\$100 per lot): \_\_\_\_\_  
 Lot Line Adjustment (\$100 per lot): \_\_\_\_\_  
 Family Exemption

Reviewing Authority: \_\_\_\_\_ Hearing Date: \_\_\_\_\_

Decision:  Approved  Denied Tax:  Current  Delinquent

Conditions/Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Subdivision Agent Signature \_\_\_\_\_

Date \_\_\_\_\_

### APPLICANT INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### PROPERTY OWNER INFORMATION (If different from applicant)

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### PROJECT INFORMATION

Parcel Number: \_\_\_\_\_ E911/Street Address: \_\_\_\_\_

Zoning District: \_\_\_\_\_ Historic Overlay District: \_\_\_\_\_

Original Lot Size (in Acres): \_\_\_\_\_ CBPA District: \_\_\_\_\_

Number of Old Parcels: \_\_\_\_\_ Number of New Parcels: \_\_\_\_\_

Type of Proposed Street(s):  Public  Private  None

Width of Existing/Proposed Street(s): \_\_\_\_\_

## APPLICANT STATEMENT

I hereby certify that I have the authority to make the foregoing application, that the information given is complete and correct to the best of my knowledge, and that the plat conforms to the regulations as set forth in the Town of Urbanna Subdivision and Zoning Ordinances as written and also with the description contained in this application.

\_\_\_\_\_  
Applicant's Signature (if not Property Owner)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature (if not Property Owner)

\_\_\_\_\_  
Date

## PROPERTY OWNER STATEMENT

I hereby certify that I/we own the above described property, that the information given is complete and correct to the best of my knowledge, that the plat conforms to the regulations as set forth in the Town of Urbanna Subdivision and Zoning Ordinances as written and also with the description contained in this application, and that the above person(s), group, corporation or agent has the full and complete permission of the undersigned owner(s) to make application for a subdivision as set forth in the Town of Urbanna Subdivision and Zoning Ordinances as written.

\_\_\_\_\_  
Property Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Property Owner's Signature

\_\_\_\_\_  
Date

## CONDITIONS

1. This permit application is not valid unless all property owner(s) signatures are affixed and dated.
2. All permit application charges are nonrefundable, regardless of whether the permit application is approved or denied once submitted. All checks for payment should be made payable to Town of Urbanna.