



Dinwiddie County Planning Department
P. O. Box 70
Dinwiddie, Virginia 23841
(804) 469-4500 • (804) 469-5322 Fax

Co-Location & New Communication Tower Application

*Information must be typed or printed and completed in full.
Attach additional pages where necessary.*

1) LAND USE INFORMATION

Application Type: (Check One): Co-Location New Communication Tower

Description of Request: _____

Existing Zoning: _____ Existing Acreage: _____ Cost of work: _____

Contractor: _____ Address: _____

Work#: _____ Cell#: _____ Email: _____

2) APPLICANT/AGENT INFORMATION

Applicant(s): _____ Home/Cell# _____
Address: _____ Work# _____

Agent(s): _____ Home/Cell# _____
Address: _____ Work# _____

Property Owner Contract Purchaser Other: _____

3) PROPERTY OWNER INFORMATION

Property Owner's Name and address (see note on last page): _____

Property Owner's Mailing Address (If this address is different from that listed in the Assessor's Office.): _____

Contact# _____
Property Tax Parcel Number: _____ Phone# _____

4.)

SUBJECT PARCEL INFORMATION

General Location of Project: _____

Tax Map # _____

Subdivision Name: _____

Section: _____ Block _____

Address: _____

Zoning: _____ Acreage _____

Existing Use: _____

Conditions: _____

Tax Map # _____

Subdivision Name: _____

Section: _____ Block _____

Address: _____

Zoning: _____ Acreage: _____

Existing Use: _____

Conditions: _____

1. Explain fully the proposed use, type of development, operation program, reason for this request, etc.:

2. State how this request will not be materially detrimental to adjacent property, the surrounding neighborhood or county in general. Include, where applicable, information concerning: Use of public utilities; effect of request on public schools; effect on traffic, to include means of access to nearest public road; effect on existing and future area development; etc.:

3. List case numbers and explain any existing use permit, special exception, conditional use or variance previously granted on the parcels in question:

4. The required fee must accompany this application. A fee schedule is available from the Planning Department, 14016 Boydton Plank Road, Pamplin Administration Building, Dinwiddie Virginia. Checks must be made payable to: "Treasurer, County of Dinwiddie".
5. Enclosed with the application, a copy of the appropriate county tax map with the property marked (provided at pre-application conference) and, if available, a surveyed plat of the entire parcel.
6. Enclose with this application any required plans or plats (plans must be folded).
7. I/We hereby certify that to the best of my/our knowledge all the above statements and the statements contained in any exhibits transmitted are true and that the adjacent property owners listed herewith are the owners of record as of the date of the application:

Date: _____, 20_____

SIGNATURE OF AGENT _____
(This is the person who is acting for the property owner and responsible for this application.)

AGENT'S NAME _____
(Typed or printed)

SIGNATURE OF APPLICANT _____
(Same name as used in Item 2, Page 1)

APPLICANT'S NAME _____
(Typed or printed)

I authorize you, the merchant, to initiate an electronic debit to my account for the amount rendered on this check plus the legal limit returned check fee if the item is dishonored. The use of a check for payment is my acceptance of this policy.

Signature _____