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 Zoning Administrator
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 hamiltonzoning@gmail.com

Special Use Permit Application

Town of Hamilton

Date _____	PIN _____	Zoning District _____
Street Address _____		

Agent's Name _____
Phone No. _____
E-Mail _____
Mailing Address _____

Owner's Name _____
Phone No. _____
E-Mail _____
Mailing Address _____

A special use permit is requested for a _____	Section _____	Subsection _____
as per Article _____		

Additional Submission Requirements:

- An application properly completed.* The application must be filed in the name of the owner, occupant or contract owner. A statement from the property owner claiming knowledge and agreement with the request for a special use permit must be included.
- A statement of support.* Applicant must file a statement in support of their request stating the nature of their request, and how it conforms to Article 10 of the Hamilton Zoning Ordinance.
- A site plan or plat of the property.* A site plan or plat must be included drawn to scale and showing all existing buildings including accessory buildings and any proposed structure or alteration.
- Payment of fee.* The fee for a special use permit application must be paid at the time of submission. FEES ARE NON-REFUNDABLE.
- Applicant must attend meetings.* Applicants or their agents must be present at the Planning Commission and Town Council meetings on the advertised public hearing dates.

Agent/Owner:

I have read this completed application, understand its intent and freely consent to its filing. The information provided is accurate to the best of my knowledge. I understand that the Town may deny, approve, or conditionally approve that for which I am applying. Furthermore, I grant permission to the Town or authorized government agents to enter the property and make such investigations and tests as they deem necessary.

 Agent/Owner's Signature

 Date

For Town Use Only

Application Received	Hearing Date
Approved	<input type="checkbox"/> Fees Paid \$
Denied	Permit #