

City of Galax  
**ZONING APPLICATION**

Zoning Administrator, City of Galax, 111 E. Grayson Street, Galax, VA 24333 --- Telephone 276-236-2422

Zoning Permit and Review - \$ 0.00  
Zoning Amendment - \$ 250.00  
Zoning Change - \$ 250.00 \*  
Conditional Use Permit - \$ 250.00 \*  
Zoning Variance - \$ 250.00 \*  
Zoning Appeal - \$ 250.00

OFFICE USE ONLY	
Application Number:	_____
Date Received:	_____
Hearing Date:	_____
Decision:	_____

\* - cost plus \$ 10.00 for each certified letter to adjacent property owners

Name of Applicant: \_\_\_\_\_

If not the Property Owner, what is the relationship: \_\_\_\_\_

Address: \_\_\_\_\_

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

Email: \_\_\_\_\_

Name of Property Owner (s): \_\_\_\_\_

Address: \_\_\_\_\_

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

Email: \_\_\_\_\_

Address of Property subject to application: \_\_\_\_\_

Legal Description of Property: Parcel Number: \_\_\_\_\_

Names and addresses of all individuals, corporations or firms owning property adjacent to the Subject Property, including those separated by a Public Way (street or road). Information is available in the Commissioner of Revenue's Office. This information is not required for a Zoning Permit or Review

Name	Address
_____	_____
_____	_____
_____	_____
_____	_____

Applicants Request: Explain completely the reason for the zoning request, intended use, proposed improvements, existing structures on the property, etc. or attach a statement along with the other required maps and documents (see attached directions).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Property Owner (s): \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

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**INTERNAL USE ONLY**

Permit approved this \_\_\_\_\_ day of \_\_\_\_\_

Permit Disapproved this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_ signature

\_\_\_\_\_ date

**IF HEARING IS REQUIRED:**

Date application received and fees received: \_\_\_\_\_

Future Land Use zoning designation: \_\_\_\_\_

Publication dates for public hearings:

    Planning Commission: \_\_\_\_\_

    City Council: \_\_\_\_\_

    BZA: \_\_\_\_\_

Date public hearing was conducted by City Council: \_\_\_\_\_

Date public hearing was conducted by Planning Commission: \_\_\_\_\_

Date public hearing was conducted by BZA: \_\_\_\_\_

Any additional meetings that were scheduled: \_\_\_\_\_

Date recommendation of Planning Commission  
was presented to City Council: \_\_\_\_\_

Recommendation by Planning Commission: Approved ( ) or disapproval ( )

City Council final action: Approved ( ) or disapproval ( ) or no action taken ( )

BZA Final Action: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Proffers or special conditions offered by owner or accepted by Planning Commission,  
City Council or BZA:

\_\_\_\_\_

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**Plan Review Process & Submittal Information:**

Submit three (3) copies of plans and additional information as required for review.

**Single and Two Family Residential**

Site plan shall include:

- A. Copy of the plat or boundary survey ( required for rezoning, variances, zoning appeals) or shape of the property to be built upon.
- B. The location and footprint of and buildings and improvements on the property. Include dimensions.
- C. Any proposed alterations of additions including dimensions to property lines, buildings, etc.
- D. All streets that front the property and any drive or driveway that will enter the property.

**Commercial, Industrial or Multi-Family Developments**

Site plan shall not be at less than 1" = 50' scale and shall include the information required above and all the following additional information:

- E. All existing and proposed roads and drainage ways within the property.
- F. Existing topography with contours at five foot intervals.
- G. Curb cuts, drives and parking and loading areas.
- H. Landscaping and planting screens.
- I. All existing and proposed utilities.
- J. The proposed use of the land and buildings.
- K. The existing zoning.
- L. A vicinity map showing the relationship of the proposed development to the entire street city, the street system, the surrounding use districts, the surrounding properties.
- M. The plan shall be certified by a licensed civil engineer, architect or surveyor that the plan as shown is correct and true.
- N. The plan shall have a form on the plan for approval signatures by VDOT, State of Virginia Health Department, City Council and the Planning Commission.
- O. The plan shall have a form on the plan for certification by the owner and trustee of the mortgage, if any, that they adopt the plan and dedicate the streets shown on the plan and agree to make any required improvements of adjacent street as shown on the plans.

Plan review process is typically 20 working days from the date of receipt. After review, the site plan is returned to the Zoning Administrator and then to the applicant for corrections. A letter outlining all corrections, which can be used as a checklist, will be issued. After all corrections are made and the plan reviewed, the Zoning Administrator will begin the zoning as required with the planning commission or board for zoning appeals. An approved zoning permit may be issued after all zoning requirements and approvals have been issued.