

Signature of Owner

Town of Luray

Zoning Permit Application

Application No.:

I, as owner or authorized agent for the property described below, do hereby certify that I have the authority to make this application for a Zoning Permit for the activity described below and as show on any attached plans or specifications, that the information provided is correct and that any construction/use will conform to the regulations of the Town's Zoning Ordinance and other codes of the Town of Luray, County of Page, and Commonwealth of Virginia, as applicable. This permit application authorizes the Zoning Administrator or designee to perform reasonable site inspections as required to confirm information provided and compliance with the conditions applicable to this permit. Further I understand that any deviation from the application as requested shall require the express written approval of the Zoning Administrator.

Application:		Site Development Rezoning	O Property SubdivisionO Special Use Permit	O Boundary Line AdjustmentO Zoning Variance
Applicant In	fori	nation:		
Applicant Na	ne			
Company Nar	ne			
Address				
Property Ow	ner	Information:		
Owner Name				
Property Info	orm	ation:		
Site Address				
Page County Tax Map Number				
Request Info	rma	ntion:		
Nature of Req	ues	t (Describe Fully)		
		See Appropriate Application	Appendix for Additional Information Requir	ed with Your Application
Signature of Applicant				Date

Date



Town of Luray
Rezoning Application
Application No.:

Existing Property Information:	
Site Address	
Page County Tax Map Number	Town Zoning District
Request Information:	
Requested Zoning District	
Total Acreage to be Rezoned	(Entire Parcel Shall be Requested to be Rezoned)
Nature of Request (Describe fully to include future J	property use and planned structure(s) construction)
Please include location map, plat, property deed, impa	ct analysis statement, and proffer statement with your Application
I (we), the undersigned, do hereby respectfully make	e application and petition to the Town of Luray to amend the of the Town of Luray, Virginia. I (we) authorize Town of
I (we) authorize the Town of Luray to place standar of this rezoning request during the application consi	rd signage on the property necessary for notifying the public deration process.
I (we) hereby certify that this application and its acc (our) knowledge.	companying materials are true and accurate to the best of my
Signature of Applicant	Date
Signature of Applicant	Date
Signature of Owner	Date
Signature of Owner	Date