Site Development - Zoning Application
Major/Minor Site Plan or Master Plan
Department of Planning & Zoning
143 Third Street, NW, Suite 1
Pulaski, VA 24301
540-980-7710
http://www.pulaskicounty.org

Applicant:			
Mailing Address:			
Phone:		**E-mail:**	
Property Owner: (If Different)		**Tax Map Number(s):**	
911Address/Site of the proposal:		**Total Area or Acreage of Parcel:**	
Zone District: _____ **Is the proposed use allowed in this zone district?** _____ **Proposed Height:** ____ **List Setbacks** Front: Side: Rear:	Is this an addition or expansion of an existing site or new construction? Explain here: _____ Has the applicant consulted with the Erosion and Sediment Control Program Manager? _____ Has the applicant consulted with the water and sewer provider? _____ Water Provider _____ Sewer Provider _____ Has the applicant met with VDOT to discuss the entrance/change in entrance? Attach VDOT approval letter/permit or describe actions to date:		
Is Site Plan Attached? YES Or NO	**Preliminary plans can be sent via e-mail to eholeton@pulaskicounty.org One hard copy will be required prior to permit. A consultation with county staff departments is highly encouraged prior to site plan submittal. Please contact 540-98-7710 to schedule appointment. Zoning site plan checklist is attached. All elements shall be shown.**		
Major or Minor Site Plan?	**Major site plans shall be stamped by a licensed professional. Minor site plan can be conceptual sketch.**		

Pulaski County assumes no legal or financial liability to the applicant or any third party whatsoever by approving the plans associated with this permit. The approval of a zoning permit is based upon the information provided. By signing this application, I grant permission for an agent of the building or zoning department to visit my site for necessary review and inspections. I understand that site plan approval is not a construction permit and all zoning and building permits shall be obtained prior to construction.

Signature (Property Owner): _____ **Date:** _____

Printed Name (Property Owner): _____ **Date:** _____

Received by: _____	Date: _____
Payment Type and Amount:	Airport Overlay Review: