



**COUNTY OF FAIRFAX, VIRGINIA
APPLICATION FOR DETERMINATION
PURSUANT TO VIRGINIA CODE SECTION 15.2-2232**

*** This area to be completed by staff ***

APPLICATION NUMBER _____

Date application received _____ by _____

Date(s) Revised _____

Date application accepted _____ by _____

(Please Type or Clearly Print)

PART I: APPLICATION SUMMARY

LOCATION OF PROPOSED USE

Address _____

City/Town _____ Zip Code _____

Place Name (example: Dale High School) _____

Tax Map I.D. Number(s) _____

Fairfax County Supervisor District _____

APPLICANT(S)

Name (Company or Agency) _____

Agent Name _____

(Note: Failure to notify County of a change in agent may result in application processing delays)

Agent's Mailing Address _____

City/Town _____ State _____ Zip Code _____

Telephone Number (____) _____ Fax (____) _____

E-mail _____

Secondary Contact _____

Telephone Number (____) _____ E-mail _____

BRIEF DESCRIPTION OF PROPOSED USE

Total Area of Subject Parcel(s) _____

Zoning District _____

Previous Zoning Approvals for all uses on site (proffered conditions, special permits, special exceptions, variances, development plans)

PROPERTY OWNER(S) OF RECORD

Owner _____

Street Address _____

City/Town _____ State _____ Zip Code _____

Has property owner been contacted about this proposed use? ____ YES ____ NO

SIGNATURE

The undersigned acknowledges that additional Fairfax County land use review requirements may be identified during the review of this 2232 Review application and the fulfillment of such requirements is the responsibility of the applicant. The undersigned also acknowledges that all Fairfax County Zoning Ordinance requirements pertaining to this project shall be fulfilled.

In the event a new agent is assigned responsibility for this application, the applicant agrees to provide a letter to the Department of Planning and Zoning authorizing the transfer of responsibility for the application and providing all new contact information. In the event the applicant fails to notify County staff of a change in agent, the application may be subject to processing delays.

Signature of Applicant or Agent _____

Date _____

Submit completed application to:

**Chris Caperton, Chief, Facilities Planning Branch
Fairfax County Department of Planning and Zoning
12055 Government Center Parkway, Suite 730
Fairfax, Virginia 22035-5507
(703) 324-1380**