



COUNTY OF FAIRFAX

APPLICATION No: \_\_\_\_\_

Department of Planning and Development

(Staff will assign)

Zoning Evaluation Division

12055 Government Center Parkway, Suite 801

Fairfax, VA 22035 (703) 324-1290, TTY 711

<https://www.fairfaxcounty.gov/planning-development/zoning/application-packages>

**APPLICATION FOR A SPECIAL EXCEPTION**

(PLEASE TYPE or PRINT IN BLACK INK)

<b>APPLICANT</b>	NAME		
	MAILING ADDRESS		
	PHONE HOME ( )	WORK ( )	
	PHONE MOBILE ( )		
<b>PROPERTY INFORMATION</b>	PROPERTY ADDRESS		
	TAX MAP NO.	SIZE (ACRES/SQ FT)	
	ZONING DISTRICT	MAGISTERIAL DISTRICT	
	PROPOSED ZONING IF CONCURRENT WITH REZONING APPLICATION:		
<b>SPECIAL EXCEPTION REQUEST INFORMATION</b>	ZONING ORDINANCE SECTION		
	PROPOSED USE		
<b>AGENT/CONTACT INFORMATION</b>	NAME		
	MAILING ADDRESS		
	PHONE NUMBER	HOME	WORK
	PHONE NUMBER	MOBILE	
<b>MAILING</b>	Send all correspondence to (check one): <input type="checkbox"/> Applicant –or- <input type="checkbox"/> Agent/Contact		
<p>The name(s) and addresses of owner(s) of record shall be provided on the affidavit form attached and made part of this application. The undersigned has the power to authorize and does hereby authorize Fairfax County staff representatives on official business to enter the subject property as necessary to process the application.</p>			
<b>TYPE/PRINT NAME OF APPLICANT/AGENT</b>		<b>SIGNATURE OF APPLICANT/AGENT</b>	

**DO NOT WRITE IN THIS SPACE**

Date application accepted: \_\_\_\_\_

Application Fee Paid: \$ \_\_\_\_\_