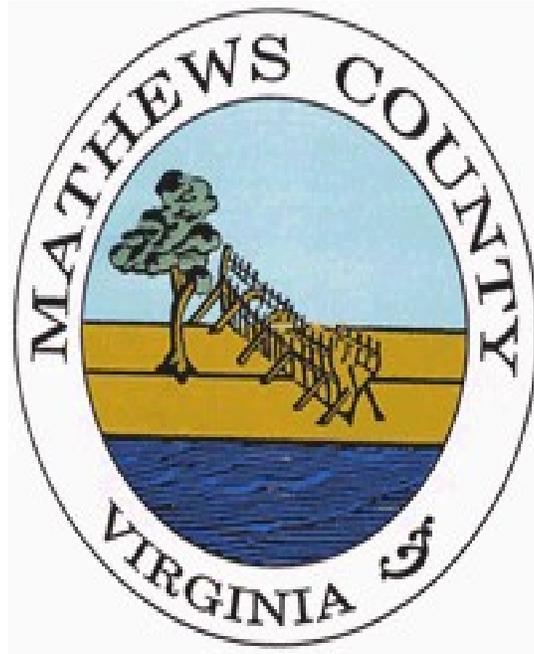


APPLICATION FOR A ZONING ORDINANCE TEXT AMENDMENT



**DEPARTMENT OF PLANNING & ZONING
COUNTY OF MATHEWS, VIRGINIA
50 BRICKBAT RD., SUITE 208
P.O. BOX 839
MATHEWS, VIRGINIA 23109
Ph: 804-725-4034
Fax: 804-725-7249**

ZONING ORDINANCE TEXT AMENDMENT

TO THE BOARD OF SUPERVISORS OF THE COUNTY OF MATHEWS, VIRGINIA

The undersigned, being all of the owner(s), applicant(s) or the respective duly authorized agents thereof, do hereby petition to amend the Zoning Ordinance of the County of Mathews as described below: (Attach additional pages if necessary).

Section #	Description of Change
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

The name(s), mailing address(es), and telephone number(s) of owner(s) applicant(s), and/or authorized agent(s), as applicable are: (Attach additional pages if necessary)

APPLICANT/OWNER:

Name: _____ Phone #: _____

Mailing Address: _____

AUTHORIZED AGENT(S):

Name: _____ Phone #: _____

Mailing Address: _____

Signed this _____ day of _____ 20__.

Signature of Applicant/Owner

Signature of Agent

Describe the relationship to the County's Comprehensive Plan.

Other comments or information: _____

TO THE GOVERNING BODY OF THE COUNTY OF MATHEWS:

This petition for a text amendment to the Zoning Ordinance of the County of Mathews was received on _____, a public hearing was held on _____, and the Planning Commission wishes to make the following recommendations to the Board of Supervisors:

By: _____
Chairman, Planning Commission

.....

ACTION OF THE BOARD OF SUPERVISORS:

On _____ the County of Mathews Board of Supervisors took the following action on the attached petition for a text amendment to the Zoning Ordinance:

.....

FILING FEE:

Permit # _____

Amount Paid \$ _____

Date Paid _____

SPECIAL POWER OF ATTORNEY AFFIDAVIT

.....

**STATE OF VIRGINIA,
COUNTY OF MATHEWS**

This _____ day of _____, 200 _____,

I, _____ (Owner/contract purchaser) of
_____ (tax map number) hereby make, constitute, and appoint
_____, my true and lawful attorney-
in-fact, and in my name, place and stead giving unto said
_____ full power and authority to do and perform all
acts and make all representation necessary, without any limitation whatsoever, to make application for said
Zoning Ordinance Text Amendment.

The right, powers, and authority of said attorney-in-fact herein granted shall commence and be in full force and
effect on _____ 20____, and shall remain in full force and effect thereafter until
actual notice, by certified mail, return receipt requested is received by the Zoning office of the County of
Mathews stating that the terms of this power have been revoked or modified.

Owner/Contract Purchaser

**COMMONWEALTH OF VIRGINIA:
County of Mathews**

Subscribed and sworn to before me this _____ day of _____, 20_____ in my
County an State aforesaid, by the aforementioned Principal.

NOTARY PUBLIC

My Commission Expires: _____