



# Zoning Permit Application

Department of Planning, Zoning & Wetlands P.O. Box 839, 50 Brickbat Road, Mathews, Virginia 23109  
Phone: 804-725-4034 Fax: 804-725-7249 Web Site: [www.mathewscountyva.gov](http://www.mathewscountyva.gov)

**PROPERTY INFORMATION**

MAP ID: \_\_\_\_\_ ACREAGE: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

CURRENT USE OF PROPERTY: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PROJECT/PROPOSED USE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**FOR OFFICIAL USE ONLY**

Application Number: \_\_\_\_\_

Zoning District: \_\_\_\_\_

Approved  Denied \_\_\_\_\_

Date Approved: \_\_\_\_\_

Approved By: \_\_\_\_\_

Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Check # \_\_\_\_\_

Notes:

**PROPERTY OWNER INFORMATION**

Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing Address \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_

**APPLICANT INFORMATION (check box if same as above  )**

Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing Address \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

By signing above I/we agree the foregoing information and attachments are true and accurate to the best of my knowledge. I understand this permit is invalid if necessary approvals from Federal, State, and Local agencies are not also obtained. I understand approval of this permit is valid for 1 year and shall expire if not incorporated into a building permit within 1 year.

The Mathews County Zoning Ordinance allows 30 days for review of this permit upon submittal of a complete application.

**Permit Fee: \$25.00                      911 Plate Fee: \$15.00**

**Make check payable to TREASURER, COUNTY OF MATHEWS**

You must contact the Planning & Zoning Office for setback verification once footing is flagged/staked:

Required  Not Required

**PLAN MUST BE TO SCALE. A PARCEL SURVEY CAN BE ATTACHED. INDICATE LOCATION OF PROPERTY LINE TO STATE HIGHWAY, ALL RIGHT-OF-WAYS AND TO WETLANDS/WATER, DIMENSION AND SHAPE OF PARCEL(S), EXISTING PRIMARY AND ACCESSORY BUILDINGS, LOCATION OF WELL, SEPTIC AND DRAINFIELD, PROPOSED NEW CONSTRUCTIONS SHOWING FRONT, REAR AND BOTH SIDE YARD SETBACK LINES.**

Notice: It is the responsibility of the applicant to establish the location of the front side, and rear property lines. Such property lines should be identified prior to calling for a setback verification.

**Setbacks from Property Line in Feet:**

Left Side: \_\_\_\_\_ Right Side: \_\_\_\_\_

Rear (Water): \_\_\_\_\_ Front (Road): \_\_\_\_\_

\_\_\_\_\_  
Applicants Signature