ROCKINGHAM COUNTY SPECIAL USE PERMIT APPLICATION

Please contact the Zoning Administrator (564-3030) for appointment to review the completed application.

CHECKLIST: Before this application can be accepted for processing, the following must be done

A. Complete the application in full and sign. (If not landowner, the landowner must also sign).
B. Enclose sketch as required in application. The sketch must be to scale and no larger than 8-1/2" x 11"

If application is not complete, it will not	t be accepted.							
F	OR OFFICE US	E ONLY						
FEE:	EE: DEADLINE DATE:							
RECEIPT #								
DATE REC								
TAXES PAID	SUP #							
APPLICANT: KKB, LLC Indicate • owner								
MAILING ADDRESS: PO Box 2037			Daytime Phone: <u>(540) 246-1524</u>					
Harrisonburg	Virginia	22801		38				
City/Town	State	Zip	Contact Person					
PROPERTY ADDRESS: 1728 Port Republic Road, Harr	risonburg, VA 228	01						
EMAIL ADDRESS: eric@hammondasset.com								
USE APPLIED FOR:R-3C								
 Special Use Permit for building height in excess Special Use Permit for building length in excess Special Use Permit for exemption from minimum total (project) units per County Ordinance Section 	of 200' per Count n lot width setbacl	y Ordinance So c in excess of e	ection 17-117(d) as amended					
LOCATION: West side of Port Republic Road		, Route #	² 253 approximately 0	miles/feet				
North of Stone Spring Road		Route # <u>726</u> ir	Chris Runion, Willia	ım Kyger				
Magisterial District, Election District #	# <u>4</u>							
ACREAGE IN PARCEL: 6.0 +/- ZONING: I to R-3C	From A-2	TAX M	AP NO: <u>125-(A)-L6, 125-(A)-L6.</u>	<u>A_</u>				
ACREAGE IN REQUEST: 6.0 +/-								
SIZE AND HEIGHT OF EXISTING OR PROPOSED B	UILDING: up to	60 feet tall, 20	03,000 +/- SF					

REQUIRED INFORMATION

Section 15.2-2284 of the Code of Virginia states that, "Zoning ordinances and districts shall be drawn and applied with reasonable consideration for the existing use and character of property, the comprehensive plan, the suitability of property for various uses, the trends of growth and change, the current and future requirements of the community as to land for various purposes as determined by population and economic studies and other studies, the transportation requirements of the community, the requirements for airports, housing, schools, parks,

playgrounds, recreation areas and other public services, the conservation of natural resources, the preservation of flood plains, the preservation of agricultural and forestal land, the conservation of properties and their values and the encouragement of the most appropriate use of land throughout the locality."

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Please answer the following questions and where required, attach additional information to this application. The information provided will be reviewed by the staff in their analysis of your request. An application for a special use permit shall be considered incomplete when an applicant fails to provide the following required information. Based upon the size, scale, complexity and impact of the proposed use, the zoning administrator may waive or modify certain requirements of this application. Any waivers or modifications shall be expressed in writing by the zoning administrator and shall be provided, by the applicant, as part of this application.

A. Please indicate the Comprehensive Plan application:	Land Use designation(s) for all tax parcels listed on this
Community Residential	
Commercial	
Mixed-Use Center	
B. How is the proposed use compatible with sur	rrounding uses?
Addresses the void of new and upper-scale housing in Redemographic desiring greater amenities in an optimal location	ockingham County, filling the demand of the transient and young professional
C. In what ways is the proposed use consistent The Property is in the UDA located within an Urban	with the intent of the zoning district? Growth Area under the Comprehensive Plan; as designated on the most recent
Concept Plan Maps for current development.	
D. Please indicate method of water supply: County Water	
E. Please indicate method of sewage disposal:	
County Sewer	
*If City water and/or sewer are selected, applicant must ha	ve full approval by City and County prior to submitting this application.
• • •	a national or state registry, located on the property? If so,
G. Are there any wetlands or sinkholes, as de If so, please provide documentation. <u>no</u>	clineated by a professional engineer, located on the property?
H. Are there any known cemeteries located on	the property? <u>no</u>
I. Is the property located in the Cross Keys at of Fire? <u>no</u>	nd Port Republic Battlefield Study Area, Core Area, or Field

J.	Is the	property	currently	in an A	Agricultural	and Forestal	District?	If so,	please	indicate	which	District.
1	10											

If the applicant wishes to offer any conditions for this special use request, please provide a copy of the of those conditions signed by those property owners listed on the deed of ownership.

FURNISH ON 8 1/2" X 11 PAPER, ONE (1) COPY OF A DRAWING SHOWING:

- (1) Size and shape of parcel of land where use or building is to be located.
- (2) Location of use of proposed and/or existing buildings---distance from public highways, from adjoining property.
- (3) Size and shape of proposed and/or existing buildings.
- (4) Access to and from property.
- (5) Relation to street and highway intersections.
- (6) Any planned screening or landscaping.
- (7) Number and location of off-street parking spaces.
- (8) Specify proposed use of area (if not contained in building).

Applicant Signature

Landowner's Signature (if different from applicant)

NOTE: ALL APPLICANTS OR LANDOWNERS MUST SIGN THE APPLICATION.

SPECIAL USE PERMIT APPLICATION (Continued)

NAMES AND COMPLETE MAILING ADDRESSES (INCLUDING HOUSE #, STREET NAME & CITY/TOWN) OF ALL ADJACENT LANDOWNERS, INCLUDING LANDOWNERS ACROSS ANY ROAD. (May use back if necessary.) Names of owners may be found in Real Estate and Land Use Office located in the Rockingham County Administration Center. Complete mailing addresses are listed in Land Use books in front of the Treasurers office (located next to the Land Use Office).

REMEMBER: SHOULD THE PROPERTY IN REQUEST BE ADJACENT TO THE CITY OF HARRISONBURG OR ANOTHER COUNTY, IT IS YOUR RESPONSIBLITY TO SUPPLY THIS OFFICE WITH THOSE NAMES AND CURRENT ADDRESSES WITHIN THE CITY OR COUNTY.

NAME

ADDRESS

Janet Hartman

1577 Stone Spring Rd. Harrisonburg, VA 22801

Ralph & Patricia Housden

3669 Shen Lake Dr. Harrisonburg, VA 22801

Mountain View Apartments LLC

PO Box 64

Bridgewater, VA 22812

Stoneleigh Investments LLC

1463 Brookhaven Dr. Harrisonburg, VA 22801

Stoneleigh Associates LLC

1463 Brookhaven Dr. Harrisonburg, VA 22801

Church - Mt. Sinai United Methodist

1728 Port Republic Rd. Harrisonburg, VA 22801

Layman & Nichols PC Trustee

1885 Port Republic Rd. Harrisonburg, VA 22801

AS APPLICANT FOR THIS SPECIAL USE PERMIT, I

Applicant Applicant hereby acknowledge that I have faithfully and correctly provided names and complete mailing addresses of all my adjoining property owners and those directly across the street or road. I understand that failure to do so will leave me liable for additional costs for readvertising and that my request could be delayed until proper notification has been given to all adjoining property owners and those property owners directly across that street or road.

Signature of Applicant