



TOWN OF SMITHFIELD

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CHESAPEAKE BAY PRESERVATION AREA ORDINANCE ZONING PERMIT WORKSHEET FOR NEW CONSTRUCTION

DATE: _____

OWNER: _____

ADDRESS: _____

PHONE NUMBER: _____

APPLICANT (If different from owner): _____

ADDRESS: _____

PHONE NUMBER: _____

PROPERTY INFORMATION

ZONING: _____ PARCEL SIZE (SQUARE FEET): _____

TAX MAP NUMBER: _____

PROPERTY ADDRESS: _____

RECORDATION DATE OF LOT OR PARCEL: _____

PROPOSED USE: _____

SQUARE FOOTAGE OF IMPERVIOUS COVER

HOUSE: _____ GARAGE: _____ DRIVEWAY: _____

SIDEWALKS: _____ TOTAL: _____

PERCENTAGE IMPERVIOUS LOT COVERAGE: _____

STORMWATER MANAGEMENT PRACTICE: _____

CHESAPEAKE BAY PRESERVATION AREA ORDINANCE INFORMATION (To Be Completed by the Planning and Zoning Department)

DOES THE SUBJECT PROPERTY CONTAIN RESOURCE PROTECTION AREAS? _____

WHAT IS THE TOTAL DISTURBED AREA OF THE PROJECT? _____

IS THE TOTAL DISTURBED AREA GREATER THAN 2,500 SQ. FT.? _____

(If yes, Virginia Runoff Reduction Method (VRRM) Calculations are required to determine if onsite storm water management is necessary.)

TYPE OF SITE PLAN REQUIRED: _____

RPA DELINEATION PERFORMED BY LICENSED SURVEYOR OR ENGINEER? _____

COMMENTS: _____

DATE REVIEWED: _____

APPROVED: _____ DENIED: _____

BY: _____ DATE: _____