



SUBMITTAL CHECKLIST FOR CONDITIONAL / SPECIAL USE PERMIT APPLICATIONS

In conjunction with Section 1-1017, *Conditional Uses*, and Section 1-1018, *Special Uses Permits for Uses Not Provided For*, of the Isle of Wight County Zoning Ordinance, as amended, the following information shall be submitted for a Conditional / Special Use Permit Application. Please note that it is the applicant's responsibility to ensure that the application is in compliance with all Federal, State and County regulations.

No application for a Conditional / Special Use shall be certified as complete unless the following information is provided:

1. Fifteen (15) copies of the original, executed application and one (1) original executed application. Both the applicant(s) and the property owner(s) must have their signature(s) notarized on page No. 2 of the application.
2. The appropriate fees have been submitted with the application. Checks should be made payable to: Treasurer, Isle of Wight County.
3. Fifteen (15) copies of a statement of the reasons for seeking such permit, and if applicable, a statement of conditions.
4. Fifteen (15) copies of a narrative description of the property which shall include the Tax Parcel Identification Number.
5. One (1) copy of the most recent deed(s) for the property(s) associated with the application.
6. A concept plan of the property showing all existing and proposed physical improvements and such other information as is necessary to clearly indicate to the Planning Commission and Board of Supervisors that adequate provisions shall be made for compliance with all standards for that particular use and the extent of the property to be so used on a given parcel or parcels. Such document shall be drawn to scale and shall include the following information:
 - o A vicinity map at a scale of no less than one (1) inch equals two thousand (2,000) feet
 - o Title of drawing
 - o Date of drawing
 - o Existing wood line
 - o North arrow
 - o Scale bar
 - o Current zoning of parcel(s) to be rezoned, including tax map number(s) and owner(s)
 - o Current zoning of adjacent parcel(s), including tax map number(s) and owner(s)
 - o Street names including route number and width(s) of the right-of-way(s)
 - o Fifteen (15) full size copies, with one (1) reduced 11 inch X 17 inch copy shall be submitted
 - o Please note that additional information on the site layout may be requested by the Zoning Administrator during the review process in order to more effectively review the application and prepare the staff reports for the Planning Commission and Board of Supervisors.

7. Fifteen (15) copies of such supplemental material as may be necessitated by the proposal itself or the district in which located or proposed to be located, and in accordance with Section 5-5000, *Supplementary Use Regulations*, of the Isle of Wight County Zoning Ordinance.
8. All real estate taxes must be paid and current at the time of submittal; otherwise, the submittal will be refused at the counter. Proof of the most recent tax payment to the County must accompany the application.

I, the undersigned, certify that this application is complete, accurate and contains all required and requested information, documents and other submittals, and that all statements made herein are, to the best of my knowledge, true and correct. I further certify that I have exercised due diligence to obtain the most recent, complete and correct information available. I understand that any section not completed in its entirety may delay processing of this application and the date of the Planning Commission public hearing and that the submittal of a complete application does not guarantee the application will be placed on the next available Planning Commission agenda.

Page Bolin

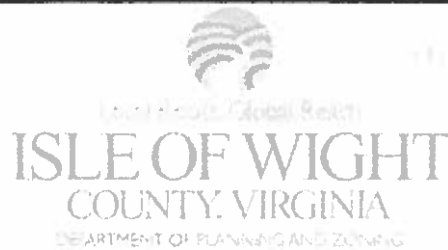
Printed or Typed Name



Signature

11/13/18

Date



APPLICATION FOR CONDITIONAL / SPECIAL USE PERMIT

This application should be used to petition for a permit for certain uses which, because of their unique characteristics or potential impacts on adjacent land uses, are not generally permitted in certain zoning districts as a matter of right, but which may, under the right set of circumstances and conditions be acceptable in certain specific locations. The following application requirements are consistent with the procedures set forth in Section 1-1017, *Conditional Uses*, and Section 1-1018, *Special Use Permits for Uses Not Provided For*, of the Isle of Wight County Zoning Ordinance, as amended.

A. APPLICATION FOR (CHECK ALL THAT APPLY):

☒ Conditional Use Permit (Are applicant proposed conditions attached?): ☒ Yes ☐ No

The proposed use or activity is listed as a conditional use in the PAC zoning district as per Section A-2003 in Article IV of the Isle of Wight County Zoning Ordinance.

☐ Special Use Permit (Are applicant proposed conditions attached?): ☐ Yes ☐ No

Proposed Use or Activity: Solar Energy Generation

B. PROJECT DESCRIPTION:

Project Name: Ho-Fol Solar Farm

Property Address (if any): LEES Mill Rd (No Street Address)

Election District: CARVILLE Legal Reference: _____

Deed Book# _____ Page# _____

Comprehensive Plan Designation: _____

The use permit will apply to _____ acres out of _____ total acres

Tax Parcel Identification # 64-01-087 Number of acres to be effected: 300 ac +/-

Tax Parcel Identification # _____ Number of acres to be effected: _____

Tax Parcel Identification # _____ Number of acres to be effected: _____

Proposed Utilities (check all that apply): Public Water ☐ Private Well ☐

Public Sewer ☐ Private Septic ☐

C. APPLICATION INFORMATION:

Applicant(s) Name(s): _____

Address: _____

City, State, Zip Code: _____

Phone No.: _____ Email: _____ Fax No.: _____

Property Owner(s) Name(s): _____

Address: _____

City, State, Zip Code: _____

Phone No.: _____ Email: _____ Fax No.: _____

Applicants/Owners Affidavit (including compliance with all deed restrictions and covenants)

This application must be signed by the owner(s) of the subject property or must have attached written evidence of the owner's consent, which may be in the form of a binding contract of sale with the owner's signature or a letter signed by the owner(s), containing written authorization to act with full authority on the owner(s) behalf in filing this use permit application. Signing this application shall certify the owner's compliance with all deed restrictions and covenants, and shall constitute the granting of authority of the County to enter onto the property for the purpose of conducting site analyses and compliance with Federal, State and County regulations.

Applicant: _____
Printed or Typed Name

Applicant: _____ Date: _____
Signature

County of Isle of Wight, Commonwealth of Virginia

Subscribed and sworn to before me _____,
A Notary Public in and for the County of Isle of Wight,
Commonwealth of Virginia, this ____ day of _____, 20____

Notary Public

My Commission Expires _____

Owner: _____
Printed or Typed Name

Owner: _____ Date: _____
Signature

County of Isle of Wight, Commonwealth of Virginia

Subscribed and sworn to before me _____,
A Notary Public in and for the County of Isle of Wight,
Commonwealth of Virginia, this ____ day of _____, 20____

Notary Public

My Commission Expires _____

Owner: _____
Printed or Typed Name

Owner: _____ Date: _____
Signature

County of Isle of Wight, Commonwealth of Virginia

Subscribed and sworn to before me _____,
A Notary Public in and for the County of Isle of Wight,
Commonwealth of Virginia, this ____ day of _____, 20____

Notary Public

My Commission Expires _____

Owner: _____
Printed or Typed Name

Owner: _____ Date: _____
Signature

County of Isle of Wight, Commonwealth of Virginia

Subscribed and sworn to before me _____,
A Notary Public in and for the County of Isle of Wight,
Commonwealth of Virginia, this ____ day of _____, 20____

Notary Public

My Commission Expires _____

C. **APPLICATION INFORMATION:**

Applicant(s) Name(s): Carmine Iadarola
Address: 4100 E Mississippi Ave, 500
City, State, Zip Code: Denver, CO 80246
Phone No.: 303-437-4063 Email: Carmine@aquusar.biz Fax No.: _____
Property Owner(s) Name(s): _____
Address: _____
City, State, Zip Code: _____
Phone No.: _____ Email: _____ Fax No.: _____

Applicants/Owners Affidavit (including compliance with all deed restrictions and covenants)

This application must be signed by the owner(s) of the subject property or must have attached written evidence of the owner's consent, which may be in the form of a binding contract of sale with the owner's signature or a letter signed by the owner(s), containing written authorization to act with full authority on the owner(s) behalf in filing this use permit application. Signing this application shall certify the owner's compliance with all deed restrictions and covenants, and shall constitute the granting of authority of the County to enter onto the property for the purpose of conducting site analyses and compliance with Federal, State and County regulations.

Applicant: Carmine Iadarola
Printed or Typed Name
Applicant: [Signature] Date: 6/29/18
Signature
County of ~~Isle of Wight~~ Arapahoe, Commonwealth of ~~Virginia~~ Colorado
Subscribed and sworn to before me Patrick Schmitz
A Notary Public in and for the County of ~~Isle of Wight~~ Arapahoe,
Commonwealth of ~~Virginia~~ Colorado, this 29 day of June, 2018

Notary Public
My Commission Expires 12/31/19

Owner: _____
Printed or Typed Name
Owner: _____ Date: _____
Signature
County of Isle of Wight, Commonwealth of Virginia
Subscribed and sworn to before me _____
A Notary Public in and for the County of Isle of Wight,
Commonwealth of Virginia, this ____ day of _____, 20____

Notary Public
My Commission Expires _____

Owner: PATRICK JOHN SCHMITZ
Printed or Typed Name
Owner: [Signature] Date: _____
Signature
County of Isle of Wight, Commonwealth of Virginia
Subscribed and sworn to before me _____
A Notary Public in and for the County of Isle of Wight,
Commonwealth of Virginia, this ____ day of _____, 20____

Notary Public
My Commission Expires _____

Owner: _____
Printed or Typed Name
Owner: _____ Date: _____
Signature
County of Isle of Wight, Commonwealth of Virginia
Subscribed and sworn to before me _____
A Notary Public in and for the County of Isle of Wight,
Commonwealth of Virginia, this ____ day of _____, 20____

Notary Public
My Commission Expires _____

To Whom It May Concern:

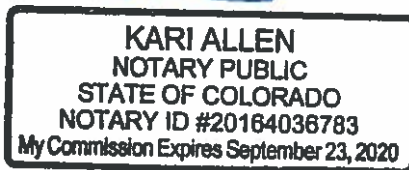
I, Edward L. Felton, Jr., am the manager of Ho-Fel LLC, which is the owner of 313.781 acres on Lee's Mill Road in Isle of Wight County, Virginia. The parcel number is 69-01-087.

SolarGen of Virginia LLC, headed by Carmine Iadarolla, has entered into a contract to pursue the development of this property. He and his team have our permission and support to act on behalf of the Ho-Fel LLC ownership to file with Isle of Wight County any and all documents necessary to gain the approvals they seek.

Signature: Edward L. Felton, Jr.

Edward L. Felton, Jr.
Manager, Ho-Fel LLC

June 29, 2018





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