



**ISLE OF WIGHT**  
**COUNTY, VIRGINIA**  
 DEPARTMENT OF PLANNING AND ZONING

**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 RAC zoning district as per Section 4-2003 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: Expansion of an existing operation currently mining materials via extraction of sand & topsoil for use in commercial and residential projects.

**B. PROJECT DESCRIPTION:**

Project Name: EXPANSION LOCUST GROVE/PRA HILL MINING SITE

Property Address (if any): Approx 1.8 miles South of Rt 10 Benns Church Intersection

Election District: Windsor Legal Reference: \_\_\_\_\_

Deed Book# \_\_\_\_\_ Page# \_\_\_\_\_

Comprehensive Plan Designation: \_\_\_\_\_

The use permit will apply to 50 acres out of 85 total acres

Tax Parcel Identification # 41-01-055 Number of acres to be effected: 50

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 N/A Private Well N/A

Public Sewer N/A Private Septic N/A

**C. APPLICATION INFORMATION:**

Applicant(s) Name(s): BAY SAND COMPANY, INC.

Address: PO BOX 961

City, State, Zip Code: SMITHFIELD VA 23431

Phone No.: 757-347-9477 Email: henry.layden1@gmail.com Fax No.: 757-365-0791

Property Owner(s) Name(s): ANN MARIE KIRK

Address: 102 WEST ROAD

City, State, Zip Code: PORTSMOUTH VA 23707

Phone No.: 52-207-5475 Email: mikekirk@obxcottages.net 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: BAY SAND COMPANY, INC.

Printed or Typed Name  
BY: Henry E Layden, President

Applicant: Henry E Layden Date: 7/10/19  
Signature

County of Isle of Wight, Commonwealth of Virginia

Subscribed and sworn to before me Henry E Layden  
A Notary Public in and for the County of Isle of Wight,  
Commonwealth of Virginia, this 10th day of July, 2019

Elizabeth Dixon Jones  
Notary Public

My Commission Expires 12-31-2022

Owner: ANN MARIE KIRK

Printed or Typed Name

Owner: Ann Marie Kirk Date: 7/10/19  
Signature

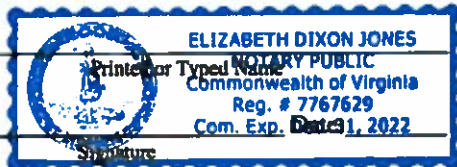
County of Isle of Wight, Commonwealth of Virginia

Subscribed and sworn to before me Ann Marie Kirk  
A Notary Public in and for the County of Isle of Wight,  
Commonwealth of Virginia, this 10th day of July, 2019

Elizabeth Dixon Jones  
Notary Public  
Reg. # 776729  
Com. Exp. Dec. 31, 2022

My Commission Expires 12-31-2022

Owner: \_\_\_\_\_



Owner: \_\_\_\_\_

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 \_\_\_\_\_

**NOTICE: THE ATTACHED CHECKLIST MUST BE COMPLETED, CERTIFIED, AND SUBMITTED OR THE APPLICATION WILL BE CONSIDERED INCOMPLETE.**

Remit Application to: Isle of Wight County Department of Planning and Zoning, 17140 Monument Circle, Suite 201 P. O. Box 80, Isle of Wight, Virginia 23397

**FOR OFFICE USE ONLY:**

Complete Application Received On: \_\_\_\_\_ Fees Paid: \_\_\_\_\_  
Tax Query: ☐ Current ☐ Delinquent Posted/Date to Post: \_\_\_\_\_

**AGENCIES REFERRALS:**

\_\_\_\_ Department of Conservation & Recreation  
\_\_\_\_ Economic Development  
\_\_\_\_ Emergency Services  
\_\_\_\_ Engineering  
\_\_\_\_ Environmental Planner  
\_\_\_\_ Health Department  
\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_ Inspections  
\_\_\_\_ Sheriff's Office  
\_\_\_\_ Town of Smithfield  
\_\_\_\_ Town of Windsor  
\_\_\_\_ VDOT  
\_\_\_\_ Budget & Finance  
\_\_\_\_ County Attorney

Verified By: \_\_\_\_\_ Date: \_\_\_\_\_

# COUNTY OF ISLE OF WIGHT

## DISCLOSURE OF REAL ESTATE HOLDINGS

Applicant BAY SAND COMPANY, INC.

Address PO BOX 961 Street \_\_\_\_\_

SMITHTFIELD VA 23431

City State Zip

### REAL ESTATE HOLDINGS TO BE AFFECTED

Location or Address	Description
Off Muddy Cross Road	41-01-055

### OTHER OWNERS OF AFFECTED REAL ESTATE

(Not Required for Corporation whose stock is traded on a national or local stock exchange or having more than 500 shareholders.)

Name of Individuals Corporation/Partnership Business Association	Address

Does any member of the Isle of Wight County Planning Commission or governing body have any interest in such property, either individually, by ownership of stock in a corporation owning such land, partnership, as the beneficiary of a trust, or the settlor of a revocable trust, or whether a member of the immediate household of any member of the Planning Commission or governing body has any such interest? Yes No

If yes, names of members:

I do solemnly swear that the foregoing statement(s) and attachments(s), if any, are complete, correct and true.

Bay Sand Company, Inc.  
Applicant Henry E Layden, President Applicant: Henry E Layden Date: 7/10/19  
Printed or Typed Name Signature

Commonwealth of Virginia  
County of Isle of Wight

Subscribed and sworn to before me Henry E Layden  
A Notary Public in and for the County of Isle of Wight, Commonwealth  
of Virginia, this 10th day of July, 2019.

Elizabeth Dixon Jones  
Notary Public

My Commission Expires 12-31-2022



# COUNTY OF ISLE OF WIGHT DISCLOSURE OF REAL ESTATE HOLDINGS

Applicant ANN MARIE KIRK

Address 102 WEST ROAD

PORTSMOUTH Street VA 23707

City State Zip

## REAL ESTATE HOLDINGS TO BE AFFECTED

Location or Address	Description
OFF MUDDY CROSS ROAD	41-01-055

## OTHER OWNERS OF AFFECTED REAL ESTATE

(Not Required for Corporation whose stock is traded on a national or local stock exchange or having more than 500 shareholders.)

Name of Individuals Corporation/Partnership Business Association	Address

Does any member of the Isle of Wight County Planning Commission or governing body have any interest in such property, either individually, by ownership of stock in a corporation owning such land, partnership, as the beneficiary of a trust, or the settlor of a revocable trust, or whether a member of the immediate household of any member of the Planning Commission or governing body has any such interest?      Yes      No

If yes, names of members:

I do solemnly swear that the foregoing statement(s) and attachments(s), if any, are complete, correct and true.

Applicant: ANN MARIE KIRK  
Printed or Typed Name

Applicant: *Ann Kirk*  
Signature

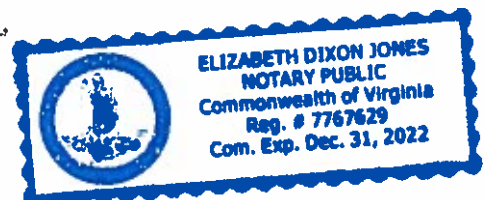
Date: 7/10/19

Commonwealth of Virginia  
County of Isle of Wight

Subscribed and sworn to before me Ann Marie Kirk  
A Notary Public in and for the County of Isle of Wight, Commonwealth  
of Virginia, this 10th day of July, 2019

Elizabeth Dixon Jones  
Notary Public

My Commission Expires 12-31-2022





**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:
  - A vicinity map at a scale of no less than one (1) inch equals two thousand (2,000) feet
  - Title of drawing
  - Date of drawing
  - Existing wood line
  - North arrow
  - Scale bar
  - Current zoning of parcel(s) to be rezoned, including tax map number(s) and owner(s)
  - Current zoning of adjacent parcel(s), including tax map number(s) and owner(s)
  - Street names including route number and width(s) of the right-of-way(s)
  - Fifteen (15) full size copies, with one (1) reduced 11 inch X 17 inch copy shall be submitted
  - 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.

Bay Sand Company, Inc.

By: Henry E Layden, President

Printed or Typed Name

Henry E Layden  
Signature

7/10/2019  
Date

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Ms. Ann Marie Kirk  
102 West Road  
Portsmouth, VA 23707

July 16, 2019

Mr. James Schaefer  
Area 11 Mine Inspector  
Division of Mineral Mining  
900 Natural Resource Drive  
Charlottesville, VA 22903

Dear Inspector Schaefer:

I, Ann Marie Kirk, grant Bay Sand Company, Inc. (DMME PERMIT ID #90501AA) right of entry for the purpose of mining to the property I own, located off Muddy Cross Road, Smithfield, VA (Tax Map #41-01-055). Bay Sand Company, Inc. shall obtain all permits or license required by local, state, and federal agencies prior to commencing activities on the above listed property(s). Entry on the property is granted until such time as the reclamation process for said mining operation is complete.

Should you have any questions or desire additional information, please feel free to contact me at the above referenced address.

Sincerely,

Ann Marie Kirk