

APPLICATION FOR COMPREHENSIVE PLAN AMENDMENT

This application should be used to petition for a change to the Comprehensive Plan Development Service District boundary or for an amendment to the Land Use District designation.

<u>AP</u>	PLICATION FOR (CHECK ALL THAT APPLY):
[Amendment to the Development Service District Boundary
	[] Newport [] Windsor [] Camptown
X	Amendment to the Land Use District Designation
<i>(</i>)	Newport [] Windsor [] Camptown
	quest to change the subject property from the $\leq \mathbb{R} + \mathbb{SE}$ to the MU land use district.
Pro	posed Use or Activity: Mixed Use Residential Development
PR	OJECT DESCRIPTION:
Pro	oject Name: P.H. Lippe
Pro	operty Address (if any):
Ele	ection District: Newport Legal Reference:
	ed Book# Page#
To	tal Acreage of Parent Tract: 118.01 Total number of acres to be effected: 80.29
	Tax Parcel Identification #34-01-003A1 Number of acres to be effected: 6.62
	Requesting Land Use District Change from: SRto
2.	Tax Parcel Identification # 34-077 Number of acres to be effected: 33-67
	Requesting Land Use District Change from: S =to Mo
3.	Tax Parcel Identification # 34-01-0770 Number of acres to be effected: 40
	Requesting Land Use District Change from: 5E to MU
	Proposed Utilities (check all that apply): Public Water Private Well
	Public Sewer Private Septic
	rubite Sewei riivate Seput

C. <u>APPLICATION INFORMATION:</u>	. ^			
Applicant(s) Name(s): Fost West Party	Applicant(s) Name(s): Fost West Partners of Vingenia, Incorporated			
Address: 5131 River Club Drive	Address: 5131 River aub Drive, Suite 210			
City, State, Zip Code: Suffork, JA 23435				
	Decist west. Corfax No.: 757-335-7583			
Property Owner(s) Name(s):				
Address: 5131 River Out Drive,	Svite 210			
City, State, Zip Code:SUFFIK, VA	23436			
Phone No.: 757-638-9100 Email: agreen	Phone No.: 757-638-9100 Email: garanne elest wester. Cour Fax No.: 757-335-7583			
Applicants/Owners Affidavit (including compli-	ance 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 Comprehensive Plan amendment 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: Aaron Millikin Printed or Typed Name	Owner:			
Applicant: Date: 8-24-18	Owner: Notary Public Signal Autority Public S			
County of Isle of Wight, Commonwealth of Virginia	County of Isle of Wight, Commonwealth of Virginia			
Subscribed and sworn to before me <u>lenifer De StaSio</u> , A Notary Public in and for the County of Isle of Wight, Commonwealth of Virginia, this 24 day of August, 2018	Subscribed and sworn to before me, A Notary Public in and for the County of Isle of Wight, Commonwealth of Virginia, thisday of, 20			
Notary Public	Notary Public			
My Commission Expires 4 - 30 - 21	My Commission Expires			
Owner: Branch P. Lawson Printed of Typed Name	Owner: JENNIFER DEST ANDE Notary Public Notary P			
Owner Signature Date: 0/24/18	Owner: Commonwealth of Virginia Date:			
County of Isle of Wight, Commonwealth of Virginia	Signal South 10. Supplies Apr 30, 2021 My Commission Expires Apr 30, 2021 County of Isle of Wight, Commonwealth of Virginia			
Subscribed and sworn to before me Jenifer De Stasto A Notary Public in and for the County of Isle of Wight, Commonwealth of Virginia, this 24 day of August, 2018	Subscribed and sworn to before me, A Notary Public in and for the County of Isle of Wight, Commonwealth of Virginia, thisday of, 20			
Herite Detas Notary Public	Notary Public			
My Commission Expires 4 · 30 - 21	My Commission Expires			



SUBMITTAL CHECKLIST FOR COMPREHENSIVE PLAN AMENDMENT APPLICATIONS

The following information shall be submitted for a Comprehensive Plan Amendment 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 Comprehensive Plan amendment 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 amendment.
- 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) of the property or properties.
- 6. A site layout of the property indicating the location of the tract(s) and the requested change. 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
 - Title of drawing
 - Date of drawing
 - o North arrow
 - o Scale bar
 - o Current land use designations of parcel(s) associated with the application, including tax map number(s) and owner(s)
 - o Current land use designation 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)
 - 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. A Community Impact Statement, which shall include the following:
 - A description of the proposed use or activity, including the type, location and nature of the land uses proposed.
 - o Impact analysis of changes in land use on the surrounding property.
 - A public facilities report, to include an analysis of existing and proposed water and sewer facilities, impact to emergency services, schools, and recreational facilities.
 - An analysis of the existing road network and required roadway improvements.

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.

Printed or Typed Name

1-22-19

Date

C. <u>APPLICATION INFORMATION:</u>				
Applicant(s) Name(s): Fast West Partie	Applicant(s) Name(s): Fast West Partners of Virginia Incorporated			
Address: 5131 River Club Drive Su	Address: 5131 River Club Drive Suite 210			
City, State, Zip Code: Suffalle, VA 23	City, State, Zip Code: Suffolk, VA 23435			
Phone No.: 757-638-9100 Email: @cronm	Costwestram Fax No.: 757-335-7583			
Property Owner(s) Name(s): EHZ LL	C			
Address: Sizi River Club Drive				
City, State, Zip Code: Sittolic, VA 23	<u>અ</u>			
· · · · · · · · · · · · · · · · · · ·	1eustwest v. com Fax No. 757-335-7583			
Applicants Owners Affidavit (including compliants)	ance 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 Comprehensive Plan amendment 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: Acron Millikin Printed or Typed Name	Owner: Printed of Type land Printed of Type land Notary Public Notary Public			
Applicant: Date: 8-24-18	Owner: Notary Public Date:			
County of Isle of Wight, Commonwealth of Virginia				
Subscribed and sworn to before me leville De Stasic A Notary Public in and for the County of Isle of Wight, Commonwealth of Virginia, this day of Alleust, 2018	Subscribed and sworn to before me, A Notary Public in and for the County of Isle of Wight, Commonwealth of Virginia, thisday of, 20			
Notary Public	Notary Public			
My Commission Expires 4 -30 - 21	My Commission Expires			
Owner: Branch P. Lawson Printed or Typed Name	Owner: Printer o. T ped Name JENNIFER DESTASIO Owner: Commonwest Verbelle			
Owner: Date 0/24/18	Owner: Commonwealth of Virginia Maintage No. 36722			
County of Isle of Wight, Commonwealth of Virginia	Maigna Gife tration No. 367225 County of Isle of Wight, Companies and Section 12, 27, 21, 21, 21, 21, 21, 21, 21, 21, 21, 21			
Subscribed and sworn to before me Jerrifer De Stasio, A Notary Public in and for the County of Isle of Wight, Commonwealth of Virginia, this day of August, 2018	Subscribed and sworn to before me, A Notary Public in and for the County of Isle of Wight, Commonwealth of Virginia, thisday of, 20			
Hurle Destro	Notary Public			
My Commission Expires 4 - 30 - 21	My Commission Expires			

C. <u>APPLICATION INFORMATION:</u>			
Applicant(s) Name(s): East West Parlners of Virginia Incorporated			
Address: 5136 River Club Doive, S.			
City, State, Zip Code: Suffolk, VA 2			
	@east westorcom Fax No.: 757-335-7503		
Property Owner(s) Name(s): Monica Ann	Lippe & Helene Kovin Lippe		
Address: 10 Pinehurst Drive			
City, State, Zip Code: Washington, A	IJ 07882		
Phone No.: 968-892-8025 Email: MONI	calcatt. net Fax No.:		
Applicants Owners Affidavit (including compli	ance with all deed restrictions and covenants)		
This application must be signed by the owner(s) of t evidence of the owner's consent, which may be in the			
signature or a letter signed by the owner(s), containing	g written authorization to act with full authority on		
the owner(s) behalf in filing this Comprehensive Plashall certify the owner's compliance with all deed in			
granting of authority of the County to enter onto the	· · · · · · · · · · · · · · · · · · ·		
and compliance with Federal, State and County regul	ations. JENNIFER DEST		
Applicant: Aaron Millikin	Owner: Notary Public Commonwealth of Virginia		
Printed or Typed Name	Replateston Repêd Nafine My Commission Expires Apr 30, 2021		
Applicant: Date: 8-24-8	Owner:Date:		
County of Isle of Wight, Commonwealth of Virginia	County of Isle of Wight, Commonwealth of Virginia		
Subscribed and sworn to before me Jenifer De Stasia	Subscribed and sworn to before me,		
A Notary Public in and for the County of Isle of Wight, Commonwealth of Virginia, this 24 day of AUGUST, 2018	A Notary Public in and for the County of Isle of Wight,		
Commonwealth of Virginia, this 4 day of 440 057, 2010	Commonwealth of Virginia, thisday of, 20		
Notary Public	Notary Public		
My Commission Expires 4 - 30-21	My Commission Expires		
4.4 A			
Ownof: / lonica Ann Lippe Printed or Typed Name	Owner: Helevic Karin Lippe Printed or Typed Name		
1 Mr. 12 Alaso 8/28/18	J. 7:00 8/3/10		
Owner: Date: U	Howard Signature State of Maryland		
County of Isle of Wight, Commonwealth of Virginia	County of Isle of Wight, Commonwealth of Virginia		
Subscribed and sworn to before me ANPPhu Melomod	Subscribed and swom to before me Patrian F. Tulsky		
A Notary Public in and for the County of Isla of Wight, Commonwealth of Virginia, this 2 Stay of 2018	A Notary Public in and for the County of Isle of Wight, Howe Commonwealth of Virginia, this 50 day of Wight, 20 8		
CATHERINE McCONNELL	State of Maryland		
My Commission Expires 1979 1970	Notary No		
My Commission Expires 9/22/22	My Commission Expires 18 Manual County		
, ,	At Commission Comission 20, 2022		

Applicant Eagle Houser L	L(
Address 5131 River Club (210		
Suffork	reet `	23435		
City	State	Zip		
REAL ESTATE HOLD	INGS TO BE AFFECT	ED		
Location or Address		Description		
Tax Percel 34-01-003A1	Tract 11	Eagle Herber		
OTHER OWNERS OF A (Not Required for Corporation whose stock is traded on shareholders.)				
Name of Individuals Corporation/Partnership Business Association		Address		
Dusiness Association				
Does any member of the Isle of Wight County Planning Comreither individually, by ownership of stock in a corporation ow settlor of a revocable trust, or whether a member of the immed governing body has any such interest? Yes If yes, names of members:	ning such land, partnersh	ip, as the beneficiary of a trust, or the		
I do solemnly swear that the foregoing statement(s) and attachments(s), if any, are complete, correct and true. Applicant: Branch Planson Applicant: Signature Commonwealth of Virginia County of Isle of Wight Subscribed and sworn to before me Service De Stasio, A Notary Public in and for the County of Isle of Wight, Commonwealth of Virginia, this 24 day of August, 20 18 Hotary Public Notary Public Registration No. 367225 Registration No. 367225 Registration No. 367225 Registration No. 367225				
My Commission Expires 4 - 30 - 21		y Commission Expires Apr 30, 2021		

Applicant EHZ LLC		
Si3/ Ox - Ci i	o Doive.	Suite 210
Suffolk Si	treet A	Z343 <u>S</u>
City	State	Zip
	DIGGEO DE AI	THE COLE IN
REAL ESTATE HOLDI	INGS TO BE AF	FFECTED
Location or Address		Description
Tex Parcel 34-01-077	Farme	· Pitt Percel
	<u> </u>	
(Not Required for Corporation whose stock is traded on a shareholders.) Name of Individuals Corporation/Partnership	1	Address
Business Association		
Does any member of the Isle of Wight County Planning Commeither individually, by ownership of stock in a corporation own settlor of a revocable trust, or whether a member of the immedigoverning body has any such interest? Yes If yes, names of members:	ning such land, pa	partnership, as the beneficiary of a trust, or the
I do solemnly swear that the foregoing statement(s) and attach Applicant: Branch P Law Schi Applicant Printed or Typed Name Printed Or Ty		stenature Signature Are complete, correct and true. Date: 5/24//
Commonwealth of Virginia County of Isle of Wight		
Luige Destas		JENNIFER DESTASIO Notary Public Commonwealth of Virginia
Nbtary Public		My Commission Expires Apr 30, 2021
My Commission Expires 4 - 30 - 21		100000000000000000000000000000000000000

Applicant Monica Ann Li	ppe		
Address No Pinchurs + D.	21		
	Street J	07882	
City	State	Zip	
REAL ESTATE HOLD	INGS TO BE AFF	ECTED	
Location or Address		Description	
Tax Parcel 34-01-0770	Lippe	property	\dashv
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			\dashv
OTHER OWNERS OF A (Not Required for Corporation whose stock is traded on shareholders.)			500
Name of Individuals Corporation/Partnership Business Association		Address	
Italene Karin Lippe	110 Pincho	ust Drive wholing ton, NJ	07882
			_
			\dashv
Does any member of the Isle of Wight County Planning Come either individually, by ownership of stock in a corporation ow settlor of a revocable trust, or whether a member of the immedgoverning body has any such interest? Yes If yes, names of members:	ning such land, part	nership, as the beneficiary of a trust, or the	; r
		100	
I do solemnly swear that the foregoing statement(s) and attack Applicant: Monica And Lippe Application	/ Vol. 5	Date: 8/28	18
Commonwealth of Virginia County of Isle of Wight Subscribed and sworn to before me A Notary Public in and for the County of Isle of Wight, Common Virginia, this A Lay of A Notary Public A N	CAT	HERINE McCONNELL RY PUBLIC OF NEW LEDBEY	
My Commission Expires 9/22/22		OTHER SET OF NEW JERSEY OTHER 9/22/2022	

	Applicant Helene Kario	Lippe		
	Address 110 Pinchorst Drive			
		reet NJ	67082	
	City	State	Zip	
	REAL ESTATE HOLD	INGS TO BE AFFEC	TED	
	Location or Address	Description		
	Tou Percel 34-01-07-D	Lippe	From	
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L				1
Г	OTHER OWNERS OF A (Not Required for Corporation whose stock is traded on shareholders.) Name of Individuals Corporation/Partnership)
	Business Association		Autica	_
	Monica Ann Lippe	110 Pirehous	Drive Westing Lou MT	07882
ŀ				-
•	Does any member of the Isle of Wight County Planning Comreither individually, by ownership of stock in a corporation own settlor of a revocable trust, or whether a member of the immediatory governing body has any such interest? Yes If yes, names of members:	ning such land, partner	ship, as the beneficiary of a trust, or the	
	I do solemnly swear that the foregoing statement(s) and attach Applicant: Printed or Typed Name Applicant	Sig	omplete correct and true. Date: 8/30/	118
P	Commonwealth of Virginia State of Mary County of Isle of Wight Howard	land		
	A Notary Public in and for the County of Isle of Wight, Commof Virginia, this day of day of State of Manyland		·d,	
	Notary Public		PATRICIA F. TULSKIE Notary Public Howard County Maryland	
	My Commission Expires 08 20 22		My Commission Expires Aug. 20, 2022	