

ISLE OF WIGHT COUNTY, VIRGINIA

DEPARTMENT OF PLANNING AND ZONING

APPLICATION FOR REZONING/CONDITIONAL ZONING AMENDMENT

This application should be used to petition for a change to the Official Zoning Map or for an amendment of zoning conditions. The following application requirements are consistent with the procedures set forth in Section 1-1015, *Amendments*, of the Isle of Wight County Zoning Ordinance, as amended.

	Rezoning
ίχί	Conditional Rezoning (Are voluntary proffered conditions attached?):X_Yes No
/ Reque	st to change the subject property(s) from the GCERAC to the PD - MX zoning district
Propo	sed Use or Activity: Mixed Use Residential Development
[]	Amendment to Conditional Zoning
Reque	st to change conditional zoning as follows (Attach current and proposed conditions):
PRO,	ECT DESCRIPTION:
Projec	t Name: Pitt & Lippe
	ty Address (if any):
Electi	on District: Newport District Legal Reference:
Deed	Book# Page#
	·····
Comp	rehensive Plan Designation: Suburban Residential, Suburban Estate
Comp	——————————————————————————————————————
Comp The re Tax P	zoning will apply to 114.59 acres out of 118.01 total acres
Comp The re Tax P Re	rehensive Plan Designation:
Comp The re Tax P Re Tax P	rehensive Plan Designation:
Comp The re Tax P Re Tax P	rehensive Plan Designation:
Comp The re Tax P Re Tax P Re Tax P	rehensive Plan Designation:
Comp The re Tax P Re Tax P Re Tax P	rehensive Plan Designation:

C. <u>APPLICATION INFORMATION:</u>	/.1		
Applicant(s) Name(s): East West Partners of Virginia Incorporated			
Address: 5131 River Club Driv	`		
City, State, Zip Code: Suffolk, VA 23435			
	- Ceastwest r. comFax No.: 757-335- 7583		
Property Owner(s) Name(s): Eagle Harbor LLC			
Address: 5131 River Club Drive; Suite 210			
City, State, Zip Code: 5-ffolk, VA 23435			
Phone No.: 151-638-9100 Email: 4000	melest wests on 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 t	he subject property or must have attached written		
evidence of the owner's consent, which may be in the			
signature or a letter signed by the owner(s), containing			
the owner(s) behalf in filing this rezoning application			
compliance with all deed restrictions and covenants,			
County to enter onto the property for the purpose Federal, State and County regulations.	of conducting site analyses and compliance with		
Applicant: Aaron Millikin	Owner: JENNIFER DESTASO		
Printed or Typed Name	Printed no lipped partie		
Applicant: Date: 8-27-8	Registration No. 367225Date: My Commission Expires Apr 30, 2021		
Signature			
County of Isle of Wight, Commonwealth of Virginia	County of Isle of Wight, Commonwealth of Virginia		
Subscribed and sworn to before me Jen For De Studie, A Notary Public in and for the County of Isle of Wight,	Subscribed and sworn to before me, A Notary Public in and for the County of Isle of Wight,		
Commonwealth of Virginia, this day of AUCHST, 2018	Commonwealth of Virginia, thisday of, 20		
Levider Destas			
Notary Public	Notary Public		
My Commission Expires 4 - 30 - 21	My Commission Expires		
Owner: Branch P. Lawson	Owner:		
Printed or Dypol Name	Printed or Type Politica		
Owner: Date:	Commonwealth of Virginia Registration No. 36723 Date: My Commission Expires Apr 30, 2021		
County of Isle of Wight, Commonwealth of Virginia	County of Isle of Wight, Commonwealth of Virginia		
Subscribed and sworn to before me Jemifer Destasio			
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, thisday of, 20		
Heride Destron			
Notary Public	Notary Public		
My Commission Expires 4 - 30 - 21	My Commission Expires		

C. <u>APPLICATION INFORMATION:</u>			
Applicant(s) Name(s): <u>Fast West Partners of Virginia</u> Incorporated			
Address: 5131 River Club Daire, Suite 210			
City, State, Zip Code: Suffork, VA 23435			
Phone No.: 757-638-9100 Email: <u>Aaronn</u>	10 eust westricom Fax No.:757-335-7583		
Property Owner(s) Name(s): EHZ LL	<u></u>		
Address: 5131 River Club Drive			
City, State, Zip Code: Suffolk, VA Z	3435		
Phone No.: 751-638-900 Email: Garone	@ costwestri con 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 t	he subject property or must have attached written		
evidence of the owner's consent, which may be in the			
signature or a letter signed by the owner(s), containing			
the owner(s) behalf in filing this rezoning application compliance with all deed restrictions and covenants,			
County to enter onto the property for the purpose			
Federal, State and County regulations.			
Applicant: Aaron Millikin	Owner:		
Printed or Typed Name	Possible for Tundal Same		
Applicant: Date B 24-18	Owner: Commonwealth of Vitamia Commonwealth o		
Signature	Signetiments for the		
County of Isle of Wight, Commonwealth of Virginia	County of Isle of Wight, Commonwealth of Virginia		
Subscribed and sworn to before me Jen Fer DeStosio	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, thisday of, 20		
To a sole of the last day of the last of t	Commonwealth of Virginia, thisday of, 20		
Notary Public	Notary Public		
My Commission Expires 4 - 30 - 21	My Commission Expires		
Wiy Commussion Expires	May Commission Expires		
Owner: Branch P. Lawson,	Owner:		
Printed or Pyped Name	Owner: Prince or Tent Name JENNIFER Public Notary Public		
Owner: Sun Date: D	Owner: JENNIFER Public Notary		
County of Isle of Wight, Commonwealth of Virginia	Owner: Signature author No. 367225 Signature author No. 367225 County of Isle of Wight, Commission Expires Apr 30, Parte: County of Isle of Wight, Commission Wealth of Virginia		
Subscribed and sworn to before me lemifer De Stosio			
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, thisday of, 20		
Je a No Deel -a	,,		
Notary Public	Notary Public		
My Commission Expires 4-30-2	My Commission Expires		

C. <u>APPLICATION INFORMATION:</u>				
Applicant(s) Name(s): Fost West Portners of Virginia, Incorporated				
	Address: 5131 River Club Drive, Suite 210			
City, State, Zip Code: Solle, VA Z	3435			
Phone No.: 757- 638-9100 Email: @avonm				
Property Owner(s) Name(s): Monica Ann Lippe & Helene Karin Lippe				
Address: 110 Pinehurst Drive				
City, State, Zip Code: Washington, NJ 07862				
Phone No.: 909-992-8025 Email: 10 moxi	calatt. 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 evidence of the owner's consent, which may be in the signature or a letter signed by the owner(s), containing the owner(s) behalf in filing this rezoning application compliance with all deed restrictions and covenants, a County to enter onto the property for the purpose Federal, State and County regulations.	form of a binding contract of sale with the owner's g written authorization to act with full authority on a Signing this application shall certify the owner's and shall constitute the granting of authority of the			
A Minima	Owner: JENNIFER DESTASIO			
Printed or Typed Name	Printed by Tubble Name			
Applicant: Date: 6-24-18	Owner: Registration No. 367225 My Commission Expires Apr 30, 203 ate:			
County of Isle of Wight, Commonwealth of Virginia	County of Isle of Wight, Commonwealth of Virginia			
Subscribed and sworn to before me level for De Stusio, A Notary Public in and for the County of Isle of Wight, Commonwealth of Virginia, this day of August, 20 18	Subscribed and sworn to before me, A Notary Public in and for the County of Isle of Wight, Commonwealth of Virginia, thisday of, 20			
Commonwealth of Anginia, this day of, 20				
Notary Public	Notary Public			
My Commission Expires 4 - 30 -21	My Commission Expires			
Owner: Manica Ann Lippe Printed or Typed Name Owner: Date: 9/28/18	Owner: Helene Kaviur Lippe Printed of Typed Name Owner: Howard P State of Maryland			
County of Isle of Wight, Commonwealth of Virginia Subscribed and sworn to before me	County of Isle of Wight, Gommonwealth of Virginia Subscribed and sworn to before me Latricia f. Tulshie			
A Notary Public in and for the County of Isle of Wight, Commonwealth of Virginia, this THERNE MCCONNELL OTARY PUBLIC OF NEW JERSEY	A Notary Public in and for the County of Icle of Wight Hower Commonwealth of Wignia, this PATRICIA F THE SKIP 18			
My Cosmission Expires 9623/2022 Notary Public	Notary Public Maryland			
My Commission Expires 9/12/22	My Commission Expires Aug. 20, 2022 My Commission Expires			



SUBMITTAL CHECKLIST FOR REZONING/CONDITIONAL ZONING AMENDMENT APPLICATIONS

In conjunction with Section 1-1015, Amendments, of the Isle of Wight County Zoning Ordinance, as amended, the following information shall be submitted for a Rezoning/Conditional Zoning 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 rezoning 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, and if applicable, a statement of proffered conditions.
 - O Any applicant proposing a conditional rezoning under the provisions of Section 1-1016, Conditional Zoning, of the Isle of Wight County Zoning Ordinance shall submit fifteen (15) copies of the signed proffer statement and one (1) original signed proffer statement. Proffered conditions shall be signed by the owner(s) of the property.
- 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 of the property to be rezoned.
- 6. For residential subdivisions of five (5) or more lots, planned development, commercial, industrial, or miscellaneous rezoning/conditional zoning amendment applications, a concept plan of the property to be rezoned shall be submitted by the applicant. 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
 - Date of drawing
 - Existing wood line
 - 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 a 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. For residential subdivisions of five (5) or more lots, planned development, commercial, industrial, or miscellaneous rezoning/conditional zoning amendment applications, a Community Impact Statement is required in accordance with Section 1-1015.F, Community Impact Statement, of the Isle of Wight County Zoning Ordinance as amended on January 6, 2011. Please refer to Section 1-1015.F for detailed requirements of the Community Impact Statement. Fifteen (15) copies of the Community Impact Statement are required and shall include the following:

Adequacy of Existing Public Facilities and Services

Additional On-site and Off-site Public Facilities and Services

Traffic Impact Analysis for projects exceeding 200 ADT, or when requested by the **Zoning Administrator**

Fiscal Impact Analysis, if the project includes residential dwellings (optional for projects without a residential component)

9. Fifteen (15) copies of a Water Quality Impact Assessment shall be required for any rezoning in the Chesapeake Bay Preservation Area which:

> will disturb any portion of the 100-foot buffer area of a Resource Protection Area (RPA), or any component identified in Section 3000.B.1 of the Chesapeake Bay Preservation Area Ordinance;

> contains ten (10) acres or more for any use, other than a development of single family detached residential lots:

> contains twenty-five (25) acres or more for the development of single family detached residential lots; or,

> any other development that may warrant such assessment due to the unique characteristics of the site or intensity of the proposed use or development, as may be required by the Zoning Administrator.

- 10. For Planned Development, fifteen (15) copies of the required supplemental information shall be submitted in accordance with Section 4-14005, Submission Requirements, of the Isle of Wight County Zoning Ordinance. Please refer to Section 4-14005 for a detailed list of the submission requirements.
- 11. 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

Signature or Typed Name

Applicant Eagle Harbor Lie

Address 5131 River Clus	- Drive, Suite	210	
Suffork	Street	23435	
City	State	Zip	
REAL ESTATE I	HOLDINGS TO BE AFF	ECTED	
Location or Address		Description	
Tax Parce 34-01-003A1	Tract 11	Eagle Hearbor	_
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	<u> </u>		_
OTHER ONAIERS		ECO A INC	
(Not Required for Corporation whose stock is trade	S OF AFFECTED REAL ed on a national or local)0
shareholders.)			
Name of Individuals Corporation/Partnership		Address	
Business Association			-
			1
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 corporati settlor of a revocable trust, or whether a member of the	ion owning such land, parti	nership, as the beneficiary of a trust, or the	
governing body has any such interest? Yes		iy member of the Flamming Commission of	
If yes, names of members:			
- 1 you, mands of monitoris.		3	
I do solemnly swear that the foregoing statement(s) and	attachments(s)-if any are	complete efficient and true	
		Symples redirect and true.	11.
Applicant: Branch P- Lawson A Printed or Typed Name	pplicant:	Signature Date: 5/2	4/8
Commonwealth of Virginia		, , , ,	
County of Isle of Wight			
Subscribed and sworn to before me Jeni fer	- DeStasio		-
A Notary Public in and for the County of Isle of Wight,	Commonwealth	Notary Public Commonwealth of Virginia	- Ł
of Virginia, this 24 day of August		Registration No. 367225 My Commission Expires Apr 30, 2	021
Notary Public	~		
My Commission Expires 4 - 30 - 21			
wy Commussion Expires 1 50 &1			

Applicant EHZ LLC		
Address 5131 River Club	o Drive	
Suffaile	Street	23435
City	State	Zip
•		
REAL ESTATE HOI	LDINGS TO BE AFF	ECTED
Location or Address		Description
Tex Parcel 34-01-077	Forme	- Pitt Dancel
(Not Required for Corporation whose stock is traded of shareholders.)		stock exchange or having more than 500
Name of Individuals Corporation/Partnership Business Association		Address
Dusiness Association		
Does any member of the Isle of Wight County Planning Coeither individually, by ownership of stock in a corporation settlor of a revocable trust, or whether a member of the imagoverning body has any such interest? Yes	owning such land, part	nership, as the beneficiary of a trust, or the
If yes, names of members:		
I do solemnly swear that the foregoing statement(s) and att Applicant: Branch P. Lewson Appl Printed or Typed Name	tachments(s) if any, are	e complete, corregt and true. Date: Date:
Commonwealth of Virginia County of Isle of Wight		
A Notary Public in and for the County of Isle of Wight, Co	DeStasion ommonwealth 20_18	JENNIFER DESTASIO Notary Public Commonwealth of Virginia
Here Des Cos Notary Public	-	Registration No. 367225 My Commission Expires Apr 30, 2021
My Commission Expires 4 - 30 - 2(

Applicant Monica Ann Lippe

Address 110 Pinchurst)rise		
Washington S	Treet J	07882	
City	State	Zip	
REAL ESTATE HOLD	INGS TO BE AFFECTED		
Location or Address	D	escription	
Tax Map 34-01-0770	Lippe pro	perty	
-	,		
	FFECTED REAL ESTAT		
(Not Required for Corporation whose stock is traded on a shareholders.)	a national or local stock e	xchange or having more than 500	
<u> </u>			
Name of Individuals Corporation/Partnership Business Association		Address	
Itelene Karin Lippe	110 Pinchurst Drive	Water Low NJ	U1882
Does any member of the Isle of Wight County Planning Comm			
either individually, by ownership of stock in a corporation own settlor of a revocable trust, or whether a member of the immed	iing such land, partnership, a iate household of any memb	as the beneficiary of a trust, or the er of the Planning Commission or	
governing body has any such interest? Yes	No	0	
If yes, names of members:			
I do solemnly swear that the foregoing statement(s) and attach	ments(s) if any, are complet	e, correct and true.	
			(1
Applicant: Monica Ann Lippe Applican	it Mucc Styl	Date: 8 26 11	<u>b</u>
Commonwealth of Virginia	•	-	
County of Isle of Wight	~ 00		
Subscribed and sworn to before me	Iclonnell,		
A Notary Public in and for the County of Isle of Wight, Common Virginia, this day of, 20, 20	nonwealth		
	CATHERIN	E McCONNELL	
Notary Public,	INVIVAL PUBL	IC OF NEW ICROSS	
My Commission Expires 9 20	\ American	n Expires 8/22/2022	

Applicant Helene Karin	Lippx		
Applicant Helene Karin Address 110 Pinehurst	Drive		
Washington Su	reetNJ	01882	
City	State	Zip	
REAL ESTATE HOLDI	NGS TO BE AFF	ECTED	
Location or Address		Description	
Tarparel 34-01-0710	Lipp	e tarm	
OTHER OWNERS OF A			
(Not Required for Corporation whose stock is traded on a shareholders.)	i national or local	stock exchange of having more than 500	
Name of Individuals Corporation/Partnership		Address	
Business Association			
Monieu Ann Lippe	No Vinelus	- IN, not grished w, wind to	<i>778</i> 82
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 immed governing body has any such interest? Yes	ning such land, part	nership, as the beneficiary of a trust, or the	
If yes, names of members:			
I do solemnly swear that the foregoing statement(s) and attach	ments(s), if any, are		
Applicant: Helene Karin Lippe Applicant	deesa	Signature Date: 8/30/18	
Commonwealth of Virginia Maryland County of Isle of Wight Howard			
Subscribed and sworn to before me tatricia F. A Notary Public in and for the County of Isle of Wight, Common of Virginia, this 30 day of August, 20	Tulstie	inty of Howard	
Notary Public My Commission Expires		PATRICIA F. TULSKIE Notary Public Howard County Maryland	
	M	y Commission Expires Aug. 20, 2022	

EAST WEST PARTNERS OF VIRGINIA, INCORPORATED 14700 VILLAGE SQUARE PLACE MIDLOTHIAN, VIRGINIA 23112

August 24, 2018

To whom it may concern:

The undersigned hereby confirms that Aaron Millikin is authorized to act on behalf of East West Partners of Virginia, Incorporated in connection with the attached application for rezoning certain parcels in Isle of Wight County, Virginia

Witness the following signature pursuant to due authority.

East West Partners of Virginia,

Incorporated

By:

Kathryn H. Pearson

Vice President

EAGLE HARBOR, L.L.C. 14700 VILLAGE SQUARE PLACE MIDLOTHIAN, VIRGINIA 23112

August 24, 2018

To whom it may concern:

The undersigned hereby confirms that Branch P. Lawson is authorized to act on behalf of Eagle Harbor, L.L.C. in connection with the attached application for rezoning certain parcels including a 6.62-acre parcel known as Tract 11 in the Eagle Harbor subdivision and owned by Eagle Harbor, L.L.C.

Witness the following signature pursuant to due authority.

Eagle Harbor, L.L.C., by Eagle Harbor

Management Corporation,

Its Manager

By:

athryn H. Pearson

Vice President

EH2, L.L.C. 14700 VILLAGE SQUARE PLACE MIDLOTHIAN, VIRGINIA 23112

August 24, 2018

To whom it may concern:

The undersigned hereby confirms that Branch P. Lawson is authorized to act on behalf of EH2, L.L.C. in connection with the attached application for rezoning certain parcels including the parcel known as the "Pitt Parcel" and owned by EH2, L.L.C.

Witness the following signature pursuant to due authority.

EH2, L.L.C., by EWP Entity Management Corporation,

its Manager

By:

Senior Vice President