

# Dinwiddie County Planning & Zoning Department

## LAND USE AMENDMENT APPLICATION



Dinwiddie County  
Planning Department  
P. O. Drawer 70  
Dinwiddie, Virginia 23841  
(804) 469-4500 ext 2117  
(804) 469-5322 /fax

Rec'd 10-7-21  
Date Rec'd 10-7-21  
Time Rec'd 10:30am  
Pre-Application Conference Date: ✓  
This application has been amended: YES  
Reviewed by: JAD

Case No.: C-21-5  
Fee Amount: 1500  
Receipt No: 33537  
NO

Information must be typed or printed and completed in full.  
Attach additional page(s) where necessary.

586-6733 L.M.  
P.C. Mtg. Nov. 10<sup>th</sup> 7:00 PM

### 1) LAND USE INFORMATION

(Circle): BOS / PC / BZA      New/Renewal      Amend Previous Case: Y / N  
Previous/Renewed Case#: \_\_\_\_\_      Land Use Taxation: Y / N

Application Type: (Circle One):  Variance     Administrative Variance     Conditional Use Permit  
 Rezoning     Street Vacation     Special Exception  
 Amendment

Description of Request: Western Heights Baptist church would like to  
in stall an LED sign

Existing Zoning: R1      Existing Acreage: \_\_\_\_\_  
Proposed Zoning: \_\_\_\_\_      Proposed Acreage: \_\_\_\_\_  
Total Acreage: \_\_\_\_\_

Water (Circle One): Public      Well  
Sewer (Circle One): Public      On-site Well and Septic

Attached: (circle): Miscellaneous Information/Master Plan/Textual Statement/Proffered Conditions

### 2) APPLICANT/AGENT INFORMATION

Applicant(s): Hollywood Signs      Home/Cell# 804-733-8956  
Address: 23202 Airport St. N. Dinwiddie, VA 23803      Work# \_\_\_\_\_  
Agent(s): \_\_\_\_\_      Home/Cell# \_\_\_\_\_  
Address: \_\_\_\_\_      Work# \_\_\_\_\_

Property Owner       Contract Purchaser       Other: Contractor

### 3) PROPERTY OWNER INFORMATION

Property Owner's Name and address (see note on last page):  
Western Heights Baptist Church, Inc.  
24416 Cox Rd, N. Dinwiddie, VA 23803  
Contact# 804-218-9422  
Property Tax Parcel Number(s): 21-2A

Property Owner's Mailing Address (If this address is different from that listed in the Assessor's Office.):  
\_\_\_\_\_  
\_\_\_\_\_  
Contact# \_\_\_\_\_

4.)

**SUBJECT PARCEL INFORMATION**

General Location of Project: replace existing sign located near road

Tax Map # 21-2A  
Subdivision Name: \_\_\_\_\_  
Section: \_\_\_\_\_ Block \_\_\_\_\_  
Address: \_\_\_\_\_  
Zoning: \_\_\_\_\_ Acreage \_\_\_\_\_  
Existing Use: \_\_\_\_\_  
Conditions: \_\_\_\_\_

Tax Map # \_\_\_\_\_  
Subdivision Name: \_\_\_\_\_  
Section: \_\_\_\_\_ Block \_\_\_\_\_  
Address: \_\_\_\_\_  
Zoning: \_\_\_\_\_ Acreage: \_\_\_\_\_  
Existing Use: \_\_\_\_\_  
Conditions: \_\_\_\_\_

Tax Map # \_\_\_\_\_  
Subdivision Name: \_\_\_\_\_  
Section: \_\_\_\_\_ Block \_\_\_\_\_  
Address: \_\_\_\_\_  
Zoning: \_\_\_\_\_ Acreage \_\_\_\_\_  
Existing Use: \_\_\_\_\_  
Conditions: \_\_\_\_\_

Tax Map # \_\_\_\_\_  
Subdivision Name: \_\_\_\_\_  
Section: \_\_\_\_\_ Block \_\_\_\_\_  
Address: \_\_\_\_\_  
Zoning: \_\_\_\_\_ Acreage: \_\_\_\_\_  
Existing Use: \_\_\_\_\_  
Conditions: \_\_\_\_\_

1. Explain fully the proposed use, type of development, operation program, reason for this request, etc.:

Replace existing sign with LED sign

2. State how this request will not be materially detrimental to adjacent property, the surrounding neighborhood or county in general. Include, where applicable, information concerning: Use of public utilities; effect of request on public schools; effect on traffic, to include means of access to nearest public road; effect on existing and future area development; etc.:

This sign will not be materially detrimental to any adjacent properties as there is an existing sign and the new LED sign will replace the current sign. There are no properties directly beside the church that this sign will affect.

3. List case numbers and explain any existing use permit, special exception, conditional use or variance previously granted on the parcels in question:

4. If requesting a variance or special exception, explain the unique physical hardship or extraordinary situation that is justification for the request:

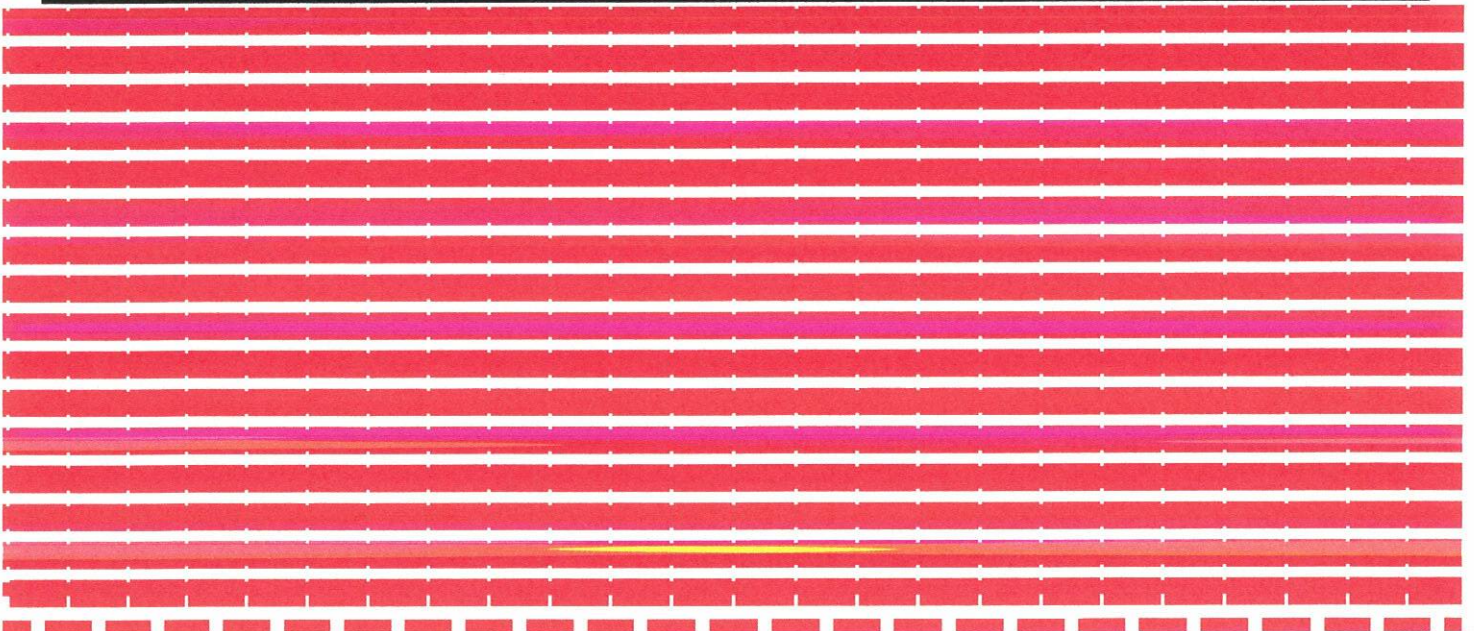
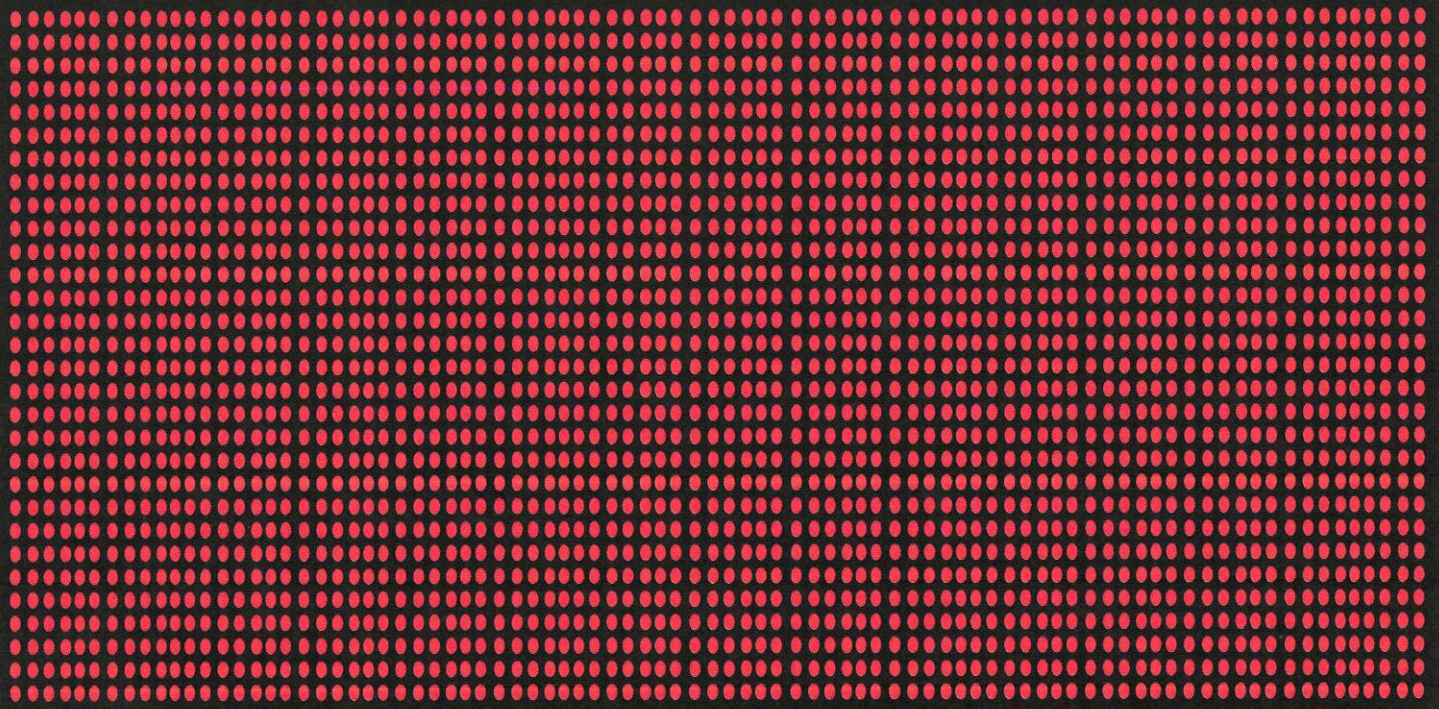
5. Complete names and address (including Zip codes) of all owners adjacent, across the road or highway from the property and across any railroad right-of-way, creek, river, from such property must be obtained by the applicant from the Commissioner of the Revenue, Pamplin Administration Building. If such property lies in another county or city, the respective jurisdiction will provide this information to the applicant. Applications with incomplete parcel information will not be accepted.



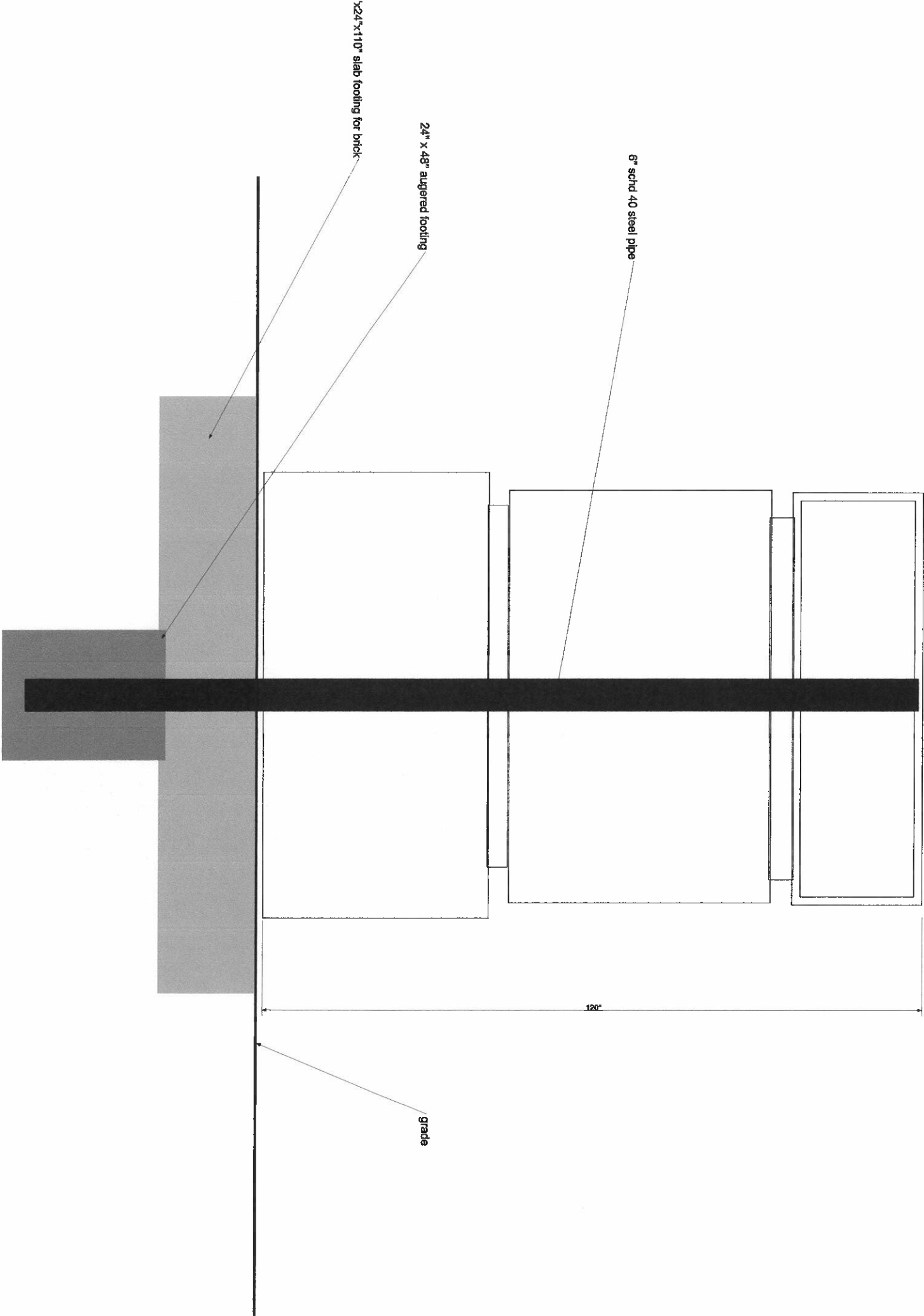
96 in

# WHBC

WESTERN HEIGHTS  
BAPTIST CHURCH



400



6" sch 40 steel pipe

24" x 48" augered footing

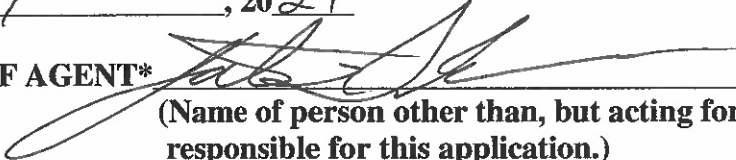
24" x 110" slab footing for brick

grade

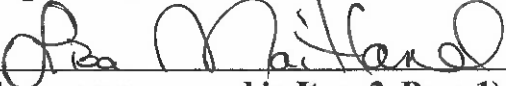
120"

6. The required fee must accompany this application. A fee schedule is available from the Planning Department, 14016 Boydton Plank Road, Pamplin Administration Building, Dinwiddie Virginia. Checks must be made payable to: "Treasurer, County of Dinwiddie".
7. Enclosed with the application, a copy of the appropriate county tax map with the property marked (provided at pre-application conference) and, if available, a surveyed plat of the entire parcel.
8. Enclose with this application any required plans or plats (plans must be folded).
9. I/We hereby certify that to the best of my/our knowledge all the above statements and the statements contained in any exhibits transmitted are true and that the adjacent property owners listed herewith are the owners of record as of the date of the application:

Date: 10-7, 2021

SIGNATURE OF AGENT\*   
 (Name of person other than, but acting for, the property owner and responsible for this application.)

AGENT'S NAME Jonathan Durdabow  
 (Typed or printed)

SIGNATURE OF APPLICANT\*\*   
 (Same name as used in Item 2, Page 1)

APPLICANT'S NAME Lisa Maitland  
 (Typed or printed)

I authorize you, the merchant, to initiate an electronic debit to my account for the amount rendered on this check plus the legal limit returned check fee if the item is dishonored. The use of a check for payment is my acceptance of this policy. Signature \_\_\_\_\_

Notes: Incomplete application will not be accepted. Any request that requires plans must be accompanied by those plans at the time submission of the application.

\*Agent must file power of attorney from the property owner(s) giving the agent authority to submit this application.

\*\* If the applicant is not the owner of the property, the applicant must file power of attorney from the property owner(s) giving the applicant authority to submit this application.