

Lee County
Department of Zoning
P.O. Box 912
Jonesville, VA 24263

Zoning Permit No. _____

Tax Map No. _____

Today's Date: _____

Permit Expires 1 Year to Date

Name: _____ Address: _____

City: _____ Phone (____) _____ Owner Y ___ N ___

* Owner's name, if different from above _____

Address _____ Phone _____

Existing Zone _____ Deed Book _____ Page # _____ Deed Document # _____

This applicant has applied for a permit to:

_____ Build new single-family dwelling _____ Build new multi-family dwelling

_____ Place a singlewide mobile home _____ Place a doublewide home

_____ Replace a singlewide mobile home _____ Replace a doublewide home

_____ Other _____

Location of Project: _____

Size (in acres) _____ Existing Land Use _____

Surrounding Land Uses:

East _____ West _____

North _____ South _____

Other Dwelling on Property? _____

If so, relationship to occupants to applicant _____

Maximum height _____ Minimum Lot Size _____

Set Backs: Front _____ Rear _____ Side _____

Physical Site Characteristics: _____

Other: _____

The applicant will need the following:

_____ Reconnect onto existing system _____ Perc Test to apply for new system

_____ City Water _____ Well Water _____ Spring Water

_____ City Septic _____ Private Septic

I hereby certify that the above information is true and correct to the best of my knowledge. I understand that misrepresentations may result in the zoning permit being withheld or possible legal actions taken if the zoning ordinance is knowingly violated.

Signature of Applicants: _____

Approval of Zoning Administrator: _____

Please attach a map showing the site, lot line dimensions, location of any proposed structures and distances to lot lines from structure(s).

_____ Zoning Permit _____ Perc Test Only

Fee Charged \$ _____ Collected as – Check # _____ Cash _____