COUNTY OF ALBEMARLE

APPLICATION FOR A SPECIAL EXCEPTION

	Request for a waiver, modification, variation or substitution permitted by Chapter 18 = 523.12 Application \$503 + Technology surcharge \$20.12 OR		Variation to a previously approved Plannec Development rezoning application plan or Code of Development = 523.12 plication \$503 + Technology surcharge \$20.12
	Relief from a condition of approval = 523.12 Application \$503 + Technology surcharge \$20.12 Provide the following 3 copies of a written request specifying the section or sections being requested to be waived, modified, varied or substituted, and any other exhibit documents stating the reasons for the request and addressing the applicable findings of the section authorized to be waived, modified, varied or substituted.		Provide the following 3 copies of the existing approved plan illustrating the area where the change is requested or the applicable section(s) or the Code of Development. Provide a graphic representation of the requested change.
Pr			1 copy of a written request specifying the provision of the plan, code or standard for which the variation is sought, and state the reason for the requested variation.
Cı	arrent Assigned Application Number (HS, HO, CI	LE,	SDP, SP or ZMA)
	oplicant / Contact Person Gregory Alling		
Ac	ldress 3393 Loch Brae Ln City C	harle	ottesville State VA Zip 22901
Da	ytime Phone# (<u>434</u>) <u>328-9520</u> Fax# ()		Email allthon@yahoo.com
Ov	vner of Record ALLING, GREGORY & CHIMI T	НО	NDEN
Ad	dress 3393 Loch Brae Ln City Ci	harlo	ottesville State VA Zip 22901
Da	ytime Phone# (<u>434</u>) <u>328-9520</u> Fax# ()		Email allthon@yahoo.com

County of Albemarle Community Development Department 401 McIntire Road Charlottesville, VA 22902 Voice: (434) 296-5832 Fax: (434) 972-4126 Page 2

Signature of Owner / Agent / Contract Purchaser

COUNTY OF ALBEMARLE

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APPLICATION SIGNATURE PAGE

If the person signing the application is someone other than the owner of record, then a signed copy of the "CERTIFICATION THAT NOTICE OF THE APPLICATION HAS BEEN PROVIDED TO THE LANDOWNER" form must be provided in addition to the signing the application below. (page 3)

Owner/Applicant Must Read and Sign

By signing this application, I hereby certify that I own the subject property, or have the legal power to act on behalf of the owner of the subject parcel(s) listed in County Records. I also certify that the information provided on this application and accompanying information is accurate, true, and correct to the best of my knowledge. By signing this application, I am consenting to written comments, letters and or notifications regarding this application being provided to me or my designated contact via fax and or email. This consent does not preclude such written communication from also being sent via first class mail.

July 26, 2021

Date

Gregory Alling	434-328-9520			
Print Name		Daytime phone number of Signatory		
FOR OFFICE USE ONLY APPLICAT	TION# SEQUAL-34	Fee Amount \$523.12 Date Paid 7	127/	
By who Erecony Alling	Receipt # 12116	13415/8/490N By	10	

