

Request for Extension of Review Time Period for Rezoning Applications (Zoning Map Amendment & Proffer Amendment)

Applicant Information
Applicant/Property Owner Name: _____ Authorized Agent (if applicable): _____ Mailing Address: _____ Phone Number: _____ Email: _____
Application Information
Rezoning/Zoning Map Amendment Case Number: _____ Property Address/Location: _____ GPIN(s): _____ Original Submission Date: _____
Purpose of This Request
Pursuant to Virginia Code § 15.2-2286(A) , a locality has twelve (12) months from the date a zoning map amendment application is first submitted to take action, unless: <ul style="list-style-type: none"> The Applicant requests or consents to an extension of the review period; or The Applicant withdraws the application, at which point processing ceases.
Extension Request/Consent
I hereby REQUEST and CONSENT to an extension of the statutory 12-month review period for the above-referenced zoning map amendment application. Requested Extended Deadline Date: _____ Length of Extension Requested: 30 days 60 days 90 days Other: _____
Reason for Extension
Additional time needed to address staff or agency comments Ongoing coordination with County agencies or external stakeholders Revisions to proffers, plans, exhibits, or other supporting materials Community engagement or public outreach efforts Applicant-requested scheduling considerations Other, explain below. <hr style="border-top: 1px dashed black;"/>
Additional Information