

photocopied signatures will not be accepted.

## Application for SPECIAL USE PERMIT

Department of Planning and Development Review Land Use Administration Division 900 E. Broad Street, Room 511 Richmond, Virginia 23219 (804) 646-6304

http://www.richmondgov.com/

## 54P-038139-2618

Application is hereby submitted for: (check one)  I special use permit, new		
special use permit, new special use permit, plan amendment		
☐ special use permit, text only amendment		
, same only and an arrangement		
Project Name/Location		
Property Adress: 3151 Moody Avenue		Date: 07/05/2018
10 / 1-10 P #, Fee:		
Total area of affected site in acres: 0.269		<del>_</del>
(See page 6 for fee schedule, please make check payable to the "City	of Richmond")	NOITARTSINIMOA 32U OUA
Zoning		MOITA GEOMAINA A 221 I GW
Zoning Current Zoning: R-5		
Current Zoning: R-5		JUL 5 2018
Existing Use:		
		HECEINED
Proposed Use		
(Please include a detailed description of the proposed use in the require	ed applicant's report	)
Subdivide existing lot into two separate parcels. An "over/under" duplex (each unit will have two b	edrooms) will be built on the	e subdivided lot.
Existing Use:		
Is this property subject to any previous land use cases?		
Yes No		
If Yes, please list the Ordinance Number:		
Applicant/Contact Person: J. Mark Slack		
Company: Virginia Realty Ventures, LLC		
Mailing Address: 7706 Sunderland Road		
City: Richmond	State: VA	7in Code: 23229
Telephone: _(804) 3,706,384	Fax: (804	) 7,407,838
Email: JMarkSlack@KenawhaRA.com		
Promonto Con Control	Vi.	
Property Owner: Virginia Realty Ventures, LLC		
If Business Entity, name and title of authorized signee: J.M.	ark Slack, co-Managing Me	emper
(The person or persons executing or attesting the execution of this Appl	ication on behalf of	the Company contidend to the
she has or have been duly authorized and empowered to so execute or a	ittest)	the Company Certifies that he or
Mailie Address and Santa		
Mailing Address: same as above		
City:	State:	_ Zip Code:
Email:	. Fax: _(	
1000/		
Property Owner Signature		
71111		
The names, addresses, telephone numbers and signatures of all owners of sheets as needed. If a local representative signatures of all owners of the state of the	f the property are re	equired. Please attach additional
sheets as needed. If a legal representative signs for a property owner, ple	ease attach an execu	ited power of attorney. Faxed or

NOTE: Please attach the required plans, checklist, and a check for the application fee (see Filing Procedures for special use permits)