

Application for PRELIMINARY PLAT SUBDIVISION

The City Planning Commission

The City Planning and Development Review
Land Use Administration Division

900 E. Broad Street, Room 511

Richmond, Virginia 23219

http://www.richmond.ov.com/

http://www.richmondgov.com/

| Application is hereby submitted for: (check one) ND USE ADMINISTRATION  Preliminary Approval (New)   Plat of Correction  Preliminary Approval (Extension)   Subdivision Confirmation Letter   |  |
|---|--|
| Name/Location Name of the Subdivision: SwansBoro Campon Spate: 4-27 - 2016  |  |
| Property Address: 3303 LAWSON   | STREET Tax Map # 50002284011                               |
| Number of Lots: 4 Fee: 560.00   |  |
| 1 ee1 ee1   | (check made payable to "City of Richmond")                 |
| Statistical Summary  1) Total Area: 15840 (SF)  2) Area in Roads: (SF)  | Zoning Current Zoning: 2-5                                 |
| 3) Area in Lots: 11,047,68 (SF) 4) Area for Public Purpose: 4, 792, 32 (SF)   | Is this property subject to any previous land use case(s)? |
| 5) Average Lot Size: <b>2761.92</b> (SF)  | If Yes, please list the Ordinance Number:                  |
| 6) Minimum Lot Size: <b>2444.93</b> (SF)  | 2016.039   |
| 7) Maximum Lot Size: <b>2872.92</b> (SF)  |  |
| Public Utilities  | Proposed Use   |
| ☐ Underground   | Single Family Detached                                     |
| Overhead [Existing]   | Single Family Attached                                     |
| Overhead [New]*   | Two Family Attached/Detached                               |
|   | ☐ Multi-Family ☐ Commercial                                |
| Drainage  | ☐ Industrial   |
| Curbs & Gutter Roadside Ditches*  Roadside Ditches*  Roadside Ditches*  |  |
| Applicant/Contact Person: JANES E. MYKNIGHT   |  |
|   |  |
|   |  |
| Mailing Address: 201 Twispiple LAWE City: North Chester: It   |  |
| State: 1/2 Zip Code: 23235 Telephone: (894) 320-2646  |  |
| Fax: (Bo4) 320-7923 E-mail: Lames My Cright & Verizon, net  |  |
| Property Owner: Robert S. McCracken   |  |
| If Business Entity, title and individual who can sign for the company: Kobsitt S MCKKELLES  |  |
| Mailing Address: FF17 Compresse DL City: Kich word.   |  |
| State: <u>VA</u> Zip Code: <u>23225</u> Telephone: ( 259.) 912. 40 74   |  |
| Fax: ()   | nail: report succ 770 hormail.com                          |
| The City will send all correspondence to the applicant/contact person. Please check this boy if the   |  |
| property owner would also like to receive copies of all correspondence.   |  |
| Property Owner Signature:   |  |
| (Except for subdivision confirmation letters, the names, addresses, telephone numbers and signatures of all owners of the property are required. Please attach additional sheets as needed. If a legal representative signs for a property owner, please attach an executed power of attorney. Faxed or photocopied signatures will not be accepted.) |  |
| NOTE: Please attach the required plats, checklist, subject parcel information and a check for the application for   |  |
| (See Filing Procedures for Subdivisions.)   | evised: 1/25/2011  |