

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/

| Application is hereby submitted for: (check one) special use permit, new | | | |
|--|------------|-------------|---------------------------------------|
| special use permit, plan amendment | | | |
| ☐ special use permit, text only amendment | | | |
| Project Name/Location | | | |
| Property Address: VUU Belgian Building, 1500 N. Lombardy Street, Richm | nond, VA 2 | 23220 | Date: 12/29/2020 |
| Tax Map #:Fee: \$1,800 | | | |
| Total area of affected site in acres: 0.007 | | | |
| (See page 6 for fee schedule, please make check payable to the "City o | of Richr | nond") | |
| Zoning | | | |
| Current Zoning: I-district | | | |
| Existing Use: Educational | | | |
| Draw and Has | | | |
| Proposed Use (Please include a detailed description of the proposed use in the required | d applica | at's rapart | |
| Retain illuminable "VUU" signage at louver level of the Belgian Pavilion VannTowe | | | |
| Existing Use: Belgian Pavilion Tower as a symbol of human understanding & | | | |
| | | | |
| Is this property subject to any previous land use cases? | | | |
| Yes No | | | |
| If Yes, please list the Ordinance Number: | | - | |
| | | | |
| Applicant/Contact Person: David E. Gordon | | | • |
| Company: Virginia Union University | | | |
| Mailing Address: 1500 N. Lombardy Street | | | |
| City: Richmond | _ State: | VA | Zip Code: <u>23220</u> |
| Telephone: _(804)638-0185 | Fax: _ | (804 |) 342-3944 |
| Email: degordon@vuu.edu | | 7 | |
| | | | |
| Property Owner: Virginia Union University | 15.0 | A | 11/2 5 11 1 10 11 15 1 |
| If Business Entity, name and title of authorized signee: David | a E. Gora | on, Assista | nt Vice President of Capital Projects |
| (The person or persons executing or attesting the execution of this Applic | cation on | behalf of | the Company certifies that he or |
| she has or have been duly authorized and empowered to so execute or at | ttest.) | | the company contines that he co |
| | | | |
| Mailing Address: 1500 N. Lombardy Street | | | |
| City: Richmond | State: | | Zip Code: 23220 |
| Telephone:(804)638-0185 | Fax: _ | (804 |) 342-3944 |
| Email: degordon@vuu.edu | 1 | | |
| Property Owner Signature: | 100 | | |
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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 plans, checklist, and a check for the application fee (see Filing Procedures for special use permits)