



Ordinance Amendment Application

Department of Community Development
221 S. Nursery Avenue, Purcellville, VA 20132
(540)338-2304 Fax (540)338-7460

Permit # 0A15-03

**THIS APPLICATION FORM MUST BE FILLED OUT IN ITS ENTIRETY.
AN INCOMPLETE APPLICATION WILL RESULT IN REJECTION OF THE APPLICATION.**

Applicant: Owner Purchaser Owner's Agent
Name: Ana Maria Uceda
Company: _____
Address: 130 Misty Pond Terr.
City: Purcellville State: VA Zip: 20132
Phone Number(s): 540-751-0864
Email Address: annie@annieschildcare.us

Owner:
Name: _____
Company: _____
Address: _____
City: _____ State: ____ Zip: _____
Phone Number(s): _____
Email Address: _____

Other (1):
 Attorney Architect Engineer
 Surveyor Contractor Other: _____
Name: _____
Company: _____
Address: _____
City: _____ State: ____ Zip: _____
Phone Number(s): _____
Email Address: _____

Other (2):
 Attorney Architect Engineer
 Surveyor Contractor Other: _____
Name: _____
Company: _____
Address: _____
City: _____ State: ____ Zip: _____
Phone Number(s): _____
Email Address: _____

Correspondence to be sent to: Applicant; Owner; Other (1); Other (2); Other: _____

An ordinance text amendment is hereby requested for Article 6, Section 7.1 of the
 Zoning Ordinance -or- **Land Development and Subdivision Control Ordinance by a**
 Property Owner -or- **Property Owner's Agent -or-** **Contract Purchaser**
as detailed on the following page.

Submission Requirements:

- Complete Application Form – Must be signed by a property owner.
- Payment of Fee – Any required fees must be paid at the time of submission. FEES ARE NON-REFUNDABLE.
- Statement of Justification – A supporting statement providing the reason for the requested ordinance text amendment that must also address how the amendment complies with the Comprehensive Plan and any applicable sections of the Zoning Ordinance or Land Development and Subdivision Control Ordinance.

Date/Time Received: _____ Comm. Dev.	Received by: _____ Comm. Dev.
Materials Provided: <input type="checkbox"/> Application <input type="checkbox"/> Fee Paid <input type="checkbox"/> Statement of Justification	Property Taxes Paid: _____ Finance
	Application Complete: _____ Comm. Dev.
Ordinance: _____	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Action Date: _____	<input type="checkbox"/> Modified <input type="checkbox"/> Withdrawn



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Ordinance Text Requested to be Deleted: Article 6 Section 7.1 Residential day care or home child care.
Bullet 1 Maximum enrollment shall not exceed six at any one time.

Ordinance Text Requested to be Added: Bullet 1 Maximum enrollment shall not exceed twelve at any one time.
According to the code of Virginia 15.2-2292 bullet B which regulates zoning provisions for licensed family day homes as defined in § 63.2-100 serving six through twelve children.

"A local governing body may by ordinance allow a zoning administrator to use an administrative process to issue zoning permits for a family day home as defined in § 63.2-100 serving six through twelve children, exclusive of the provider's own children and any children who reside in the home."

The ordinance may require an approval letter from the corresponding HOA if applicable.

Type of Use - AS NECESSARY: Permitted -or- Special Use Permit

Additional Information: Revenue for the Town of Purcellville because of the anual BPOL tax.
Community benefit since we provide home care for children of working moms and dads in town.

Applicant Certification - REQUIRED FOR ALL APPLICATIONS:

I certify that: 1) I am a property owner, the authorized agent of a property owner, or the contract purchaser of property in the Town of Purcellville; 2) the information provided in this completed application form is accurate to the best of my knowledge; 3) I am submitting all required elements of a complete application; 4) I understand that incomplete applications will be rejected; 5) I understand that the Town may deny, approve, or approve with modifications that for which I am applying; and 6) I understand that someone must be present at all public meetings to represent my application or the item will be tabled to the next available meeting.

Applicant Signature _____

Date Signed 09/30/2015

Property Owner Certification - REQUIRED WHEN OWNER IS NOT THE APPLICANT:

I certify that: 1) I have read this completed application, understand its intent and freely consent to its filing; 2) the information provided is accurate to the best of my knowledge; and 3) the applicant is the contract purchaser of my property or is otherwise authorized to serve as my agent.

Property Owner Signature _____

Date Signed _____