

## **Preliminary Plat Application**

## County of Henrico, Virginia Department of Planning

Department of Planning
Henrico Planning Web Site: <a href="https://www.henrico.us/planning">www.henrico.us/planning</a>

Department of Planning, County of Henrico, Virginia, P.O. Box 90775, Henrico, Virginia 23273-0775\*\* Phone 804-501-4602

\*\* For mail use P.O. Box. For deliveries C/O the Permit Center use street address 4301 E. Parham Road, Henrico, Virginia 23228.

\*\*\*DO NOT SUBMIT FOLDED PLANS\*\*\*

Subdivision Name:		
<ul> <li>□ First Submission</li> <li>□ Nine (9) sets of plans containing each of the items listed on Page 2 - Plat Checklist.</li> <li>□ Electronic Copy of all plans and documents submitted are required to be emailed to DevEPlanReview@henrico.us</li> <li>□ Three (3) copies of Traffic Study</li> <li>○ If proposed trips exceed 4,000 per weekday or Traffic Impact Analysis required as part of a rezoning, Traffic Study should be included.</li> <li>□ Re-submission prior to obtaining Preliminary approval</li> <li>○ Number of sets determined by Planner</li> <li>Project Description:</li> <li>Parcel/GPIN #(s)</li> </ul>	For Office Use Only	
Location (Street Address from County GIS):  Existing Zoning Magisterial District  Zoning Case/POD/PUP/BZA Numbers  Density (Late (State of the PTL) and P.SA)	Number of lots	
Density (Lots/net acre for RTH and R-5A)  Utilities: Water o County o Individual Well		
Sewer o County o Individual On-Site	Sewage Disposal System	
Applicant Information: (Please Print)	Cowago Diopodai Oyotom	
Owner of Record: If more than one owner, attach additional sheets.  Name:	Engineer/Surveyor Name:	
Address:            City/State:	Address: City/State:	Zip
E-Mail	E-Mail	
Phone:	Phone:	<u> </u>
Authorized Signature* Print/Type Name	Authorized Signature*	Print/Type Name
Developer: Name:	Representative: (Explain Relationshi Name:	
Address:	Address:	7in
City/State:         Zip           E-Mail	City/State: E-Mail	Zip
Phone:	Phone:	
Authorized Signature* Print/Type Name *If Power of Attorney is involved, attach Power of Attorney form POF 005.	Authorized Signature*	Print/Type Name
FOR OFFICE USE ONLY		
Application Accepted By:	Fee:	
Date of Filing: Time of Filing:	PIV Number:	

Prelim	ninary Plat Application Checklist (To be filled out by the firm or person(s) preparing the plans)
Plat Ch	ecklist prepared in accordance with Chapter 19 of the Henrico County Code, and the requirements outlined in this application form:
	<b>Scale:</b> 1" = 100' (or other scale approved by the Planning Director) – may be modified for RTH development or for lots of 10 acres or more.
	Vicinity map (1" = 2000') with north arrow
	Proposed <b>name of subdivision</b> , location of subdivision, source of title with deed book references, parcel (GPIN) numbers, north arrow.
	Name and address of owner of the land to be subdivided, developer; and person who prepared the plat. Plat shall be prepared by a registered professional engineer, landscape architect, or registered land surveyor that is authorized to do business in the state.
	Boundary lines of land to be subdivided, and number of lots
	<b>Zoning</b> of subdivision and adjacent property, and proposed use of subdivision.
	Adjacent Parcels: the names, lot lines and parcel (GPIN) numbers of adjoining subdivisions and adjacent property owners.
	Location of <b>existing physical features</b> including buildings within the subdivision and adjacent to the subdivision within 300 feet.
	Location, width, names and use of all <b>existing public rights-of-way</b> or private rights-of way or easements within 300 feet of the subdivision.
	Proposed location of streets showing width and names, and proposed location and widths of alleys.
	Location, width and purpose of other rights-of-way and easements.
	Exact boundaries of land to be dedicated for public use, or otherwise reserved, with a statement of the purpose of the dedication or reservation.
	<b>Proposed lots and buildable area</b> ***, including layout, lot lines, lot numbers, block letters, and approximate dimensions of
	lots, including lot width, lot area, dwelling placement for any stem or cul-de-sac lots, and if townhouses for sale, the location of the buildings and setbacks from lot lines. Show the location of all setback lines not controlled by Chapter 24 of the Henrico County Code, as well as all environmental feature setback requirements. (***Buildable area – that area of the lot in which a building may be legally placed, or an existing building remain, recognizing the front yard, rear yard and side yard setback requirements.)
	Four (4) points on each sheet with coordinates in the Virginia State Plane Coordinate system. All features shown on the
	plan must be drawn to scale based on the four reference points.
	Any monument of the <b>Geodetic Control Network</b> located on the property shall be shown
	R-5A or RTH subdivision plats shall contain the following additional information: (For RTH, provide layout details, dimensions,
	setbacks and type of use, i.e., townhouse for sale, detached, semi-detached.)  □ Total Area: acres
	□ Area in common area: acres
	□ Area in Special Flood Hazard Area (floodplain): acres
	Area in dedicated streets: acres
	Proposed water supply system.
	□ If individual well system is proposed, complete the following:  ○ Provide the shortest distance from the property to public water supply:
	Specific proposed type and class of wells:
	Proposed sanitary supply system.  ☐ If individual on-site sewage disposal system is proposed, complete the following:
	<ul> <li>Provide the minimum distance from the property to public sewer:</li> <li>Include one (1) copy of a licensed soil scientist's individual lot examination report with this application.</li> </ul>
	<b>Existing topography</b> at vertical intervals of at least 2' within the subdivision and adjacent to the subdivision within 300 feet.
$\Box$	Accurately locate Wetlands, Resource Protection Areas, Stream Protection Areas, Special Flood Hazard Areas (100-Year
_	Floodplain), Dams (on-site and immediately upstream), and Mapped Dam Break Inundation Zones on the plan.
	Location and type of all <b>Best Management Practices</b> and <b>Stormwater Managements Facilities</b> with Design Calculations
	shall be shown on the plan.
	□ Calculations must include compliance worksheet, removal requirement worksheets, Virginia Runoff Reduction Method Worksheets, including the completed Site Data. Summary tabs and where necessary calculations to show compliance with the Energy Balance requirements.
	<ul> <li>□ A conceptual landscape plan is required for all BMPs in front yards and all other above-ground BMPs.</li> <li>□ A drainage area map is required (minimum scale of 1" = 400 feet) showing the limits of analysis for each stormwater discharge point.</li> </ul>
	A drainage area map is required (minimum scale of 1" = 400 feet) showing the limits of analysis for each stormwater discharge point.

		<b>onceptual erosion and sediment control plan</b> showing the location of sediment traps and/or basins and providing a eliminary sequence of construction.
		onceptual Tree Protection Plan prepared in accordance with Chapter 24 of Henrico County Code and the Henrico County
		andscape Manual. Plan must show the following at a minimum:
		Any conditions of approval of a development approval or permit relating to buffers, landscaping, screening, berms, mounds, erosion
	_	and sediment control, and water quality maintenance or protection
		Identification of all protected trees on the site Identification of tree protection zone boundaries, including the limits of land disturbance, clearing, grading, and trenching
		Limits of wetlands, tributary streams, 100-year floodplains (base flood hazard area), limits of Chesapeake Bay resource protection
		areas, all buffers required by the County Code (including resource protection area buffers and SPA buffers), and other natural features
		nvironmental Site Assessment and Acknowledgements completed and signed in accordance with Chapter 10 of the
_		ounty Code.
L		pen Space Set-Aside Plan
		Delineation of all open space set-asides and area calculations  Identification of the types and designs of open space areas, including indication of the types of priority areas (see Sec. 24-5204 of the
		zoning ordinance) and proposed development within the areas
	Tra	affic:
		Right-of-way widths, right-of-way centerlines, right-of-way centerline radii and curb return radii
		Dimensions between intersecting roads Vehicle trips per weekday
		Traffic study (3 copies) if more than 4,000 trips per weekday (if a 527 was not preformed within the last 5 years)
	1 D	
		offers and Conditions (if applicable):  A sheet containing all Zoning Proffers, previous POD or Subdivision Conditions, Provisional or Conditional Use Conditions, and Board
		of Zoning Appeals Conditions, with a statement by the engineer who prepared the signed plans that to the best of his knowledge the
		plan complies with all known conditions. Calculations to show compliance with proffered conditions shall be included, if applicable.
NOTE: A		nal permits may be required by the U.S. Army Corps of Engineers (804-771-2669) and/or the Department of Environmental Quality (804-527-5020).
Contact '		a Power (804-755-5314) to locate overhead or underground power lines and coordinate utility construction with required buffers/ planting strip easements.
		a Power (804-755-5314) to locate overhead or underground power lines and coordinate utility construction with required buffers/ planting strip easements.
CERTIII,	FICAT	a Power (804-755-5314) to locate overhead or underground power lines and coordinate utility construction with required buffers/ planting strip easements.
CERTIII, all the resubmiss	FICAT require	a Power (804-755-5314) to locate overhead or underground power lines and coordinate utility construction with required buffers/ planting strip easements.  (Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain an additional application forms submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete
CERTIII, all the resubmiss	FICAT require	a Power (804-755-5314) to locate overhead or underground power lines and coordinate utility construction with required buffers/ planting strip easements.  FION  (Name, Please Print or Type), hereby certify that the attached plats and this completed application form contained information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the
Certill, all the r submiss by the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
CERTIII, all the resubmiss	FICAT require	a Power (804-755-5314) to locate overhead or underground power lines and coordinate utility construction with required buffers/ planting strip easements.  (Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain an additional application forms submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.
Certill, all the r submissiby the r	FICAT require	(Name, Please Print or Type), hereby certify that the attached plats and this completed application form contain and information for preliminary plat applications submitted in accordance with Chapter 19 of the Henrico County Code. I understand the fincomplete or inaccurate information will result in a delay in processing and action on this application. Plans determined to be incomplete team will not be considered for processing.