



STREET CLOSURE PETITION

CHESAPEAKE PLANNING DEPARTMENT

PETITION NUMBER: _____
(Assigned by Chesapeake Planning Department)

GENERAL INFORMATION

1. Primary Petitioner(s):

Name: _____

Address: _____

13-digit Tax Map Number: _____

Interest in subject property: _____

Daytime Phone: _____ FAX Number: _____

E-mail address: _____

2. Agent's Name: _____

Agency: _____

Address: _____

Daytime Phone: _____ FAX Number: _____

E-mail address: _____

3. Provide the names and addresses of all owners of property abutting the right-of-way to be vacated:

Name: _____

Address: _____

13-digit Tax Map Number: _____

Phone: _____ FAX Number: _____

Is property owner joining this application as a petitioner? Yes No

GENERAL INFORMATION (Continued)

3. (continued):

Name: _____

Address: _____

13-digit Tax Map Number: _____

Daytime Phone: _____ FAX Number: _____

Is property owner joining this application as a petitioner? Yes No

Name: _____

Address: _____

Daytime Phone: _____ FAX Number: _____

Is property owner joining this application as a petitioner? Yes No

Name: _____

Address: _____

13-digit Tax Map Number: _____

Daytime Phone: _____ FAX Number: _____

Is property owner joining this application as a petitioner? Yes No

Name: _____

Address: _____

13-digit Tax Map Number: _____

Daytime Phone: _____ FAX Number: _____

Is property owner joining this application as a petitioner? Yes No

Name: _____

Address: _____

13-digit Tax Map Number: _____

Daytime Phone: _____ FAX Number: _____

Is property owner joining this application as a petitioner? Yes No

ACKNOWLEDGEMENT OF PRIMARY PETITIONER

PETITION NUMBER: _____

DECLARATION OF PLANNING COMMISSION/CITY COUNCIL INTEREST:

Does any member of the Planning Commission or City Council own or have any personal or financial interest in the land which is subject to this application, or has any personal or financial interest in the outcome of the decisions, as defined by the Virginia Conflict of Interest Act? No Yes If yes, please explain:

DECLARATION OF ACCURACY:

I, the undersigned, certify that this application is complete, accurate and contains all required and requested information, documents and other submittals, and that all statements made herein are, to the best of my knowledge, true and correct. I further certify that I have exercised due diligence to obtain the most recent, complete and correct information available. I understand that wrongful certification or failure to provide required or requested documents that become available after the initial submittal of this application may result in a delay in, or invalidation of, any official governmental action taken. Fraudulent representations may lead to additional penalties under law.

I also certify that the list of adjacent property owners, if required, is complete and correct as of the date of this application submittal. I will update any changes in ownership of the property that is the subject of this application and adjacent property owners upon learning that any such property has been conveyed prior to final action on this application. I understand that if the list of adjacent property owners is determined to be inaccurate, out-of-date or incomplete at a later date, any action taken on this application may be deemed null and void.

DECLARATION OF FINANCIAL RESPONSIBILITY FOR ADVERTISING COSTS:

I, the undersigned, understand that the cost of newspaper advertising for public hearing notification purposes is my responsibility and agree to pay all notices of payment due and bills associated with advertising costs for this application, including all readvertisements for continuances and appeals. *Party responsible for advertising:* Applicant Agent

ACKNOWLEDGEMENT OF PRIMARY PETITIONER (Continued)

DECLARATION OF CONSENT:

By signing below, the petitioner/agent and owner consents to entry upon the subject property by public officers, employees, and agents of the City of Chesapeake wishing to view the site for purposes of processing, evaluating or deciding this petition.

Name (signature) _____

Name (printed or typed) _____

Address _____

13-Digit Tax Map Number: _____

Date: _____

Commonwealth/State of _____

City of _____

Subscribed and sworn to before me this _____ day of _____, 20____,

by _____

NOTARY PUBLIC

Notary Registration No. _____

My commission expires: _____

ADJACENT PROPERTY OWNER (Non-Petitioner) CONSENT FORM

A petition will be submitted to the City of Chesapeake, petitioning City Council to close _____ as shown on the attached petition and plat. Because the area of closure abuts to your property, you may join this petition. If the street is closed, one-half of the vacated right-of-way will become a part of your property upon payment of a prorated share of the assessed value of the street. Should you decide not to make this payment, the vacated right-of-way will not become a part of your property.

The Chesapeake Planning Department requires your response to the following questions to complete the street closure petition:

My 13-digit tax map number is: _____

My street address is: _____

Do you wish to join in this petition? Yes No

Do you have any objections to this street closure? Yes No

If yes, please explain: _____

NOTE: If you wish to purchase your one-half share of the vacated right-of-way, you must join the application as a petitioner. If the property is jointly owned, all owners must consent.

Printed name of non-petitioner

Printed name of non-petitioner

Signature of non-petitioner

Signature of non-petitioner

Commonwealth/State of _____

City of _____

Subscribed and sworn to before me this _____ day of _____ 20____,

by _____

NOTARY PUBLIC

Notary Registration No. _____

My commission expires: _____