PLANNED DEVELOPMENT DISTRICT ZONING MAP AMENDMENT CHECKLIST for

_________________________________________________________

Project Name / Tax Map Parcel Number

(PLANNED DEVELOPMENT ZONING DISTRICTS - MHD, PRD, PUD, NM, PDMC, PDSC, PDIP)

After the mandatory pre-application meeting, county staff will mark this checklist appropriately so that it is clear to the applicant the information from Section 33.4 (c) that must be submitted with the official application.

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<th>Required for application? (County Staff)</th>
<th>Provided with application (Applicant)</th>
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**SECTION 33.4(c)**

- A narrative of the project proposal, including its public need or benefit;
- A narrative of the proposed project’s consistency with the comprehensive plan, including the land use plan and the master plan for the applicable development area.
- A narrative of the proposed project’s impacts on public facilities and public infrastructure.
- A narrative of the proposed project’s impacts on environmental features.
- A narrative of the proffers proposed to address impacts from the proposed project.
- One or more maps showing the proposed project’s regional context and existing natural and manmade physical conditions.

If the project is to amend an existing planned development district and the proposed amendment would affect less area than the entire district, the applicant shall submit a map showing the entire existing planned development district and identifying any area to be added to or deleted from the district, or identifying the area to which the amended application plan, code of development, proffers or any special use permit or special exception would apply.

An application plan showing, as applicable:

1) the street network, including
   - circulation within the project and
   - connections to existing and proposed or planned streets within and outside of the project;
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| 2) | typical cross-sections to show  
  - proportions,  
  - scale and  
  - streetscape/cross-sections/circulation; |
| 3) | the general location of pedestrian and bicycle facilities; |
| 4) | building envelopes; |
| 5) | parking envelopes; |
| 6) | public spaces and amenities; |
| 7) | areas to be designated as conservation and/or preservation areas; |
| 8) | conceptual stormwater detention facility locations; |
| 9) | conceptual grading; |
| 10) | a use table delineating  
  - use types,  
  - the number of dwelling units,  
  - non-residential square footage,  
  - building stories and/or heights,  
  - build-to lines,  
  - setbacks and yards, and  
  - other features; |
| 11) | topography, using the county’s geographic information system or better topographical information, and the source of the topographical information, supplemented where necessary by spot elevations and areas of the site where there are existing critical slopes; |
| 12) | the general layout for water and sewer systems; |
13) the location of central features or major elements within the project essential to the design of the project, such as

- major employment areas,
- parking areas and structures,
- civic areas,
- parks,
- open space,
- green spaces,
- amenities and recreation areas;

14) standards of development including

- proposed yards,
- open space characteristics, and any landscape or architectural characteristics related to scale,
- proportions, and
- massing at the edge of the district;

15) a conceptual lot layout; and

Other special studies or documentation, if applicable, and any other information identified as necessary by the county on the pre-application comment form.

A local traffic impact statement as required by Virginia Code § 15.2-2222.1 and 24 VAC 30-155-40.

Please note: There are additional submittal requirements outlined on the official application for a Zoning Map Amendment.

Read and Sign

I hereby state that, to the best of my knowledge, the official application submitted contains all information marked on this checklist as required for application.

________________________________________________  ______________________
Signature of person completing this checklist            Date

________________________________________________
Print Name

________________________________________________
Daytime phone number of Signatory