

PART 5: SUBMITTAL FORMS

ATTACHMENT 1: FORM BASED CODE APPLICATION

**ARLINGTON COUNTY, VIRGINIA
DEPARTMENT OF COMMUNITY PLANNING, HOUSING AND DEVELOPMENT
ZONING ADMINISTRATION**

COLUMBIA PIKE FORM BASED CODE APPLICATION

In accordance with the requirements of Administrative Regulation 4.1.2, Columbia Pike Form Based Code Approval Procedure, the following plan is submitted for administrative review and, where necessary, transmittal to the County Board for its consideration.

- | | |
|---|--|
| <input type="checkbox"/> Commercial Centers FBC | <input type="checkbox"/> Original Development Plan (Preliminary) |
| <input type="checkbox"/> Neighborhoods FBC | <input type="checkbox"/> Original Development Plan (Final) |
| | <input type="checkbox"/> Amendment |

Case Number: _____ Date: _____
Address: _____

Requested Use: _____

Drawings Submitted:
 Yes No

Print Name of Owner: _____ Owner's Signature: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

By: _____ () Agent
Print Name: _____ () Attorney , Signature: _____

Mailing Address:
City: _____ State: _____ Zip: _____ Phone: _____

(Office Use Only)

Date: _____

- | | |
|--|---|
| <input type="checkbox"/> Administrative Review
By/Date: _____ | <input type="checkbox"/> Special Exception Use Permit
County Board Date: _____ |
|--|---|

Fee: (n/a for Preliminary Applications) _____ Date Paid: _____

Received By: _____

Make checks payable to: Treasurer of Arlington County

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DISCLOSURE STATEMENT

CASE NO. _____

1. Description of the real estate affected:
List the addresses of all property that s affected by the application. Provide lot, block, section, and subdivision of all parcels only if the properties have not been subdivided.

Address(es): _____

Lot(s) _____ Block _____
Section _____ Subdivision _____

2. Is the owner of said real estate a corporation whose stock is traded on a national or local stock exchange and having more than five hundred (500) shareholders?
- Yes No

If "Yes", give the name of the corporation and skip to item 4.

3. List the names, addresses, and nature of interest of ALL persons having equitable ownership of the real estate to be affected including, in the case of corporate ownership, the names of stockholders, offices, and directors: and of ALL parties in interest.

PARCEL ADDRESS	NAME	ADDRESS	NATURE OF INTEREST

4. I hereby certify that this is a true and accurate disclosure of all persons having equitable ownership real estate to be affected and of all of the parties in interest.

Applicant's Signature: _____

Applicant's Address: _____

STATE OF VIRGINIA, COUNTY OF _____ TO WIT: _____

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

Notary: _____

My commission expires: _____