



RZ# 12-01 amend

Department of Planning and Zoning – Zoning Map Amendment (rezoning) Application
221 S. Nursery Avenue, Purcellville, VA 20132
(540) 338-2304 Fax (540) 338-7460

This application must be filled out in its entirety. An incomplete application form will result in rejection of the application prior to check list review. Do not write in shaded areas.

A zoning map amendment is hereby requested for the property located at Hirst Road to rezone 12 acres from the C1 Zoning District to the MC District in accordance with Article 10 of the Zoning Ordinance.

General Project Information:

- 1. Project Title: Catoctin Creek Town Center
2. Location of Property: West Side of Maple Avenue
3. Property Owner: Brent H. Mercke
4. Owner Address: 341 N. Maple Avenue, Purcellville, VA 20132
5. Owner Telephone: 703-478-8800 Fax: Email
6. Applicant/Agent: Mark Nelis PC
7. Agent Address: 196 N 21st Street, Purcellville, VA 20132
8. Agent Telephone: 540-338-5843 Fax: 540-338-3702 Email mnelis@nelislaw.com
9. Designer/Engineer: Bowman Consulting Group, LTD
10. Designer Address: 101 South Street SE, Leesburg, VA 20175
11. Designer Telephone: 703-443-2400 Fax: 703-443-2425 Email

Correspondence to be sent to: [X] Owner; [X] Agent; [X] Designer; [X] Other:

- 12. Total Acreage of parcel: 12
13. Acreage to be rezoned: 12.
14. Property Identification #(s): 452-15-3658 and 487-10-9228
15. LC Tax Map #(s): /36/////////22A2 and /36/////////22/
16. Current Zoning: C1
17. Current Use(s): Manufacturing

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- 18. Proposed Zoning: MC
- 19. Proposed Use(s): Commercial
- 20. Adjoining Property Uses(s): Public road; vacant; High School; storage yard
- 21. Adjoining Property ID #s & owners: Please attach with a separate sheet provided below.
- 22. Related Applications (if any): Comprehensive Plan Amendment
- 23. Pre-submission meeting date (if any): September 18, 2012

**Additional Submission Requirements:**

- A statement of justification and explanation.* Applicant must file a statement in support of their request. The statement should address how the application complies with the Comprehensive Plan and any applicable sections of the Zoning Ordinance as well as how the application plans to mitigate any negative impacts.
- A rezoning plat.* A surveyed plat of the property showing metes and bounds of all property boundaries, the name of property owner and all adjoining property owners. The plat should be dated not more than 6 months prior to application.
- A concept plan for the property.* The plan should contain all of the minimum design standards found on the minimum submission check list and any additional information to assist the Town in evaluating the superiority of the development request.
- Traffic Study.* When applicable. See also standards from the Department of Transportation related to 527 studies/review.
- Payment of fee.* The fee for a rezoning application must be paid at the time of submission. FEES ARE NON-REFUNDABLE.
- Proffers.* When applicable. Proffers should be provided in a format approved by the Town Attorney.

**Property Owner:**

I have read this completed application, understand its intent and freely consent to its filing. The information provided is accurate and completed to the best of my knowledge. I understand that the Town may deny, approve, or conditionally approve that for which I am applying. Furthermore, I grant permission to the Town or authorized government agents to enter the property and make such investigations or inspections they deem necessary. I also 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.

Brent H. Mercke  
Owner's Signature  
Brent H. Mercke

RM  
Oct 1, 2013  
Date

**Required Materials (as applicable, completed by Town Staff):**

For all rezoning applications:

Application    Concept Plan    Required fee    Completed checklist    Statement of Justification    Traffic Study

Proffers    Rezoning Plat

Application Complete \_\_\_\_\_ Fee \$ \_\_\_\_\_ Paid \_\_\_\_\_ Planning Initials \_\_\_\_\_

Taxes Paid \_\_\_\_\_ Finance Initials \_\_\_\_\_

Project Manager Assigned \_\_\_\_\_

File Number \_\_\_\_\_ Approved On: \_\_\_\_\_ Proffers: yes/no

Ordinance/Resolution Number(s): \_\_\_\_\_