



"Good Things Are Happening in Sussex County!"

Sussex County, Virginia
Planning and Zoning Department

SUBDIVISION REVIEW

WHAT IS A SUBDIVISION?

A subdivision is the division or re-division of property into two or more lots including changes in existing lot lines for the purpose, whether immediate or future, of lease, or transfer of ownership of a building or lot.

WHAT MUST I PROVIDE TO OBTAIN SUBDIVISION APPROVAL?

- Subdivision Application Packet
- 10 copies of the plat of the parcel to be subdivided showing the proposed subdivision, or boundary line adjustment and/or extinguishment (to include notarized signatures of the owners.) Must be prepared by a licensed engineer.
- 1 digital copy
- A filing fee:
 - **5 lots or less - \$100+ \$10 per lot**
 - **More than 5 lots - \$300+ \$10 per lot**
 - **Plat Approval (Family Division & Boundary Line Adjustments) - \$50.00 per plat**
- A surety bond may be required prior to plat approval for any infrastructure improvements, such as land disturbance, roads, and water and sewer systems.

REVIEW PROCEDURES

Subdivision review is an administrative process. For review standards, please contact the Planning and Zoning Department for further assistance.

WILL I NEED OTHER PERMITS?

You may need a zoning, building, and health department permit (for septic tank and well).

If you have any questions, please call the Planning and Zoning Department at 434-246-1043 or email mpoarch@sussexcountyva.gov.



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APPLICATION FOR SUBDIVISION PLAT REVIEW

This application shall be used to request review and approval of subdivision plats. The following application requirements are consistent with the procedures set forth in Section 6 of the Sussex County Subdivision Ordinance, as amended.

- **APPLICATION FOR (CHECK ALL THAT APPLY):**

Preliminary plat, Major Family Division Farmette Boundary Line Adjustment

Final plat, Major Lot around existing house Court Ordered

Submittal #: First Second Third Other (please specify) _____

Resubmittals only required to submit pages 1 and 3

- Application Number (*resubmittals only*): _____

- **PROJECT DESCRIPTION:**

Project Name: _____

Number of lots proposed: _____

Election District: _____

Zoning District: _____

Tax Parcel Identification # _____

Proposed Utilities (check all that apply): Public Water _____ Private Well _____

Public Sewer _____ Private Septic _____

- **APPLICATION INFORMATION:**

Applicant(s) Name(s): _____

Address: _____

City, State, Zip Code: _____

Phone No.: _____ Email: _____ Fax No.: _____

Property Owner(s) Name(s): _____

Address: _____

City, State, Zip Code: _____

Phone No.: _____ Email: _____ Fax No.: _____



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Applicants/Owners Affidavit (including compliance with all deed restrictions and covenants)

This application must be signed by the owner(s) of the subject property or must have attached written evidence of the owner's consent, which may be in the form of a binding contract of sale with the owner's signature or a letter signed by the owner(s), containing written authorization to act with full authority on the owner(s) behalf in filing this subdivision application. Signing this application shall certify the owner's compliance with all deed restrictions and covenants, and shall constitute the granting of authority of the County to enter onto the property for the purpose of conducting site analyses in compliance with Federal, State and County regulations.

Applicant: _____
Printed or Typed Name

Owner: _____
Printed or Typed Name

Applicant: _____ Date: _____
Signature

Owner: _____ Date: _____
Signature

County of Sussex, Commonwealth of Virginia

County of Sussex, Commonwealth of Virginia

Subscribed and sworn to before me _____,
A Notary Public in and for the County of Sussex,
Commonwealth of Virginia, this ___ day of _____, 20__

Subscribed and sworn to before me _____,
A Notary Public in and for the County of Sussex,
Commonwealth of Virginia, this ___ day of _____, 20__

Notary Public

Notary Public

My Commission Expires _____

My Commission Expires _____

Owner: _____
Printed or Typed Name

Owner: _____
Printed or Typed Name

Owner: _____ Date: _____
Signature

Owner: _____ Date: _____
Signature

County of Sussex, Commonwealth of Virginia

County of Sussex, Commonwealth of Virginia

Subscribed and sworn to before me _____,
A Notary Public in and for the County of Sussex,
Commonwealth of Virginia, this ___ day of _____, 20__

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A Notary Public in and for the County of Sussex,
Commonwealth of Virginia, this ___ day of _____, 20__

Notary Public

Notary Public

My Commission Expires _____

My Commission Expires _____



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SUBMITTAL CHECKLIST FOR MAJOR SUBDIVISION PLAT APPLICATIONS

In accordance with the Subdivision Ordinance of Sussex County, Virginia, as amended, the following information shall be submitted for preliminary or final major subdivision plat applications. Please note that it is the applicant's responsibility to ensure that the application complies with all Federal, State and County regulations.

No application for approval of a subdivision plat shall be certified as complete unless the following information is provided. If the required number of copies has been reduced by the Subdivision Agent, the permitted number of copies must be documented in writing and provided with the application. A pre-application conference is encouraged for all subdivision applications and may be required.

- One (1) copy and one (1) original executed application. Both the applicant(s) and the property owner(s) must have their signature(s) notarized on page 2 of the application. For second and third submittals, copy of signature page is acceptable.
- Ten (10) paper copies of a preliminary or final plat drawn to scale. Final plats must be signed in accordance with section 6-8 of the Subdivision Ordinance. Number of paper copies may be reduced by the Subdivision Agent per instructions above.
- One (1) digital copy of the plat and application materials.
- The appropriate fees must be submitted with the application. Checks should be made payable to: Treasurer, Sussex County.
- All real estate taxes must be paid and current at the time of submittal. Proof of the most recent tax payment to the County must accompany the application.

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 any section not completed in its entirety may delay processing of this application.

Signature

Date



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NOTICE: THE ATTACHED CHECKLIST MUST BE COMPLETED, CERTIFIED, AND SUBMITTED OR THE APPLICATION WILL BE CONSIDERED INCOMPLETE.

Remit Application to: Sussex County Planning and Zoning Department
20135 Princeton Road
P. O. Box 1397
Sussex, Virginia 23884

FOR OFFICE USE ONLY:

Complete Application Received On: _____ Fees Paid: _____
Tax Query: Current Delinquent Distribution Date: _____
Posted/Date to Post: _____

AGENCY REFERRALS:

- | | |
|--|---|
| <input type="checkbox"/> Department of Environmental Quality | <input type="checkbox"/> Building Inspections |
| <input type="checkbox"/> Finance | <input type="checkbox"/> Sheriff's Office |
| <input type="checkbox"/> Industrial Development Authority | <input type="checkbox"/> Town of Jarratt |
| <input type="checkbox"/> County Administration | <input type="checkbox"/> Town of Waverly |
| <input type="checkbox"/> Public Safety | <input type="checkbox"/> Town of Stony Creek |
| <input type="checkbox"/> Health Department | <input type="checkbox"/> Town of Wakefield |
| <input type="checkbox"/> VDOT | <input type="checkbox"/> Schools |
| <input type="checkbox"/> Commissioner of the Revenue | <input type="checkbox"/> County Attorney |
| <input type="checkbox"/> Sussex Service Authority | <input type="checkbox"/> Other _____ |

Verified By: _____ Date: _____