

ZONING FORM APPLICATION (SEPTIC)



Franklin County

A National Setting for Opportunity

Planning & Community Development Office

1255 Franklin Street, St. 103

Rocky Mount, Virginia 24151

DATE: _____

OWNER'S NAME: _____

MAILING ADDRESS: _____

DAY TIME PHONE #: _____ CELL PHONE #: _____

EMAIL ADDRESS: _____

TAX MAP & PARCEL #: _____ ZONING: _____ DISTRICT: _____

SUBDIVISION NAME AND LOT #: _____

DIRECTIONS TO PROPERTY FROM ROCKY MOUNT: _____

APPLICANT'S NAME: _____

MAILING ADDRESS: _____

DAY TIME PHONE #: _____ CELL PHONE #: _____

EMAIL ADDRESS: _____

PURCHASER'S NAME: _____

MAILING ADDRESS: _____

DAY TIME PHONE #: _____ CELL PHONE #: _____

EMAIL ADDRESS: _____

(MORE INFORMATION ON BACK OF PAGE)

DESCRIPTION OF USE: STICK BUILT HOME() SINGLEWIDE() DOUBLEWIDE() TRIPLEWIDE()

WILL THIS BE AN UPGRADE IN BEDROOMS: () YES () NO

NUMBER OF BEDROOMS PERKING FOR: _____

WILL THIS BE THE ONLY HOME ON THE PROPERTY? YES NO

IF NO, HOW MANY HOMES ARE CURRENTLY ON THE PROPERTY? _____

WHO OCCUPIES EXISTING HOME AND WHO AND WHAT RELATION TO LANDOWNER TO OCCUPY 2ND HOME? _____

IF BUSINESS, WHAT TYPE OF BUSINESS: _____

HOW MANY EMPLOYEES: _____

PLEASE PRINT YOUR NAME: _____

PLEASE SIGN YOUR NAME: _____

(Updated 2.24.2021)