



P.O. Box 209 | 6 East Pennsylvania Avenue  
 Lovettsville, VA 20180  
 (540) 822-5788

# Zoning Permit Application (Pool with Required Fence)

Property Owner's Name: \_\_\_\_\_ Fee: \$100

Address (Mailing) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Town/City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: Work \_\_\_\_\_ Mobile \_\_\_\_\_ Fax \_\_\_\_\_

Owner's Representative (If Applicable): \_\_\_\_\_

Address (Mailing) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Town/City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: Work \_\_\_\_\_ Mobile \_\_\_\_\_ Fax \_\_\_\_\_

### Subject Parcel Information:

Location (Street Address): \_\_\_\_\_

PIN (Property Identification Number): \_\_\_\_\_ Zoning District: \_\_\_\_\_

Is property located in Floodplain?: Yes <input type="checkbox"/> No <input type="checkbox"/>	Is property currently served by municipal water and sewer? Yes <input type="checkbox"/> No <input type="checkbox"/>
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Will there be any grading of the property?: Yes  No

**Description of Pool and Fence (height, length, width, material, square footage):**

  
  
  
  
  
  
  
  
  
  

**PLEASE INCLUDE A LOCATION PLAN SHOWING THE LOCATION OF THE IMPROVEMENT IN RELATION TO THE PRIMARY STRUCTURE AND DISTANCE FROM PROPERTY LINES**

**\*FENCES ARE SUBJECT TO SECTION 4-7 OF THE ZONING ORDINANCE**

**\*\*SWIMMING POOLS ARE SUBJECT TO 4-8 OF THE ZONING ORDINANCE**

**PROPERTY OWNER IS REQUIRED TO CHECK WITH LOUDOUN COUNTY TO SEE IF A BUILDING PERMIT IS REQUIRED**

I hereby certify that I am the property owner and this application in all its parts, including the accompanying development plan proposal, is complete, correct and in compliance with the applicable Town of Lovettsville Ordinances, to the best of my knowledge. I acknowledge responsibility for all engineering, legal, zoning and planning review fees incurred by the Town in connection with the review of this application, and all outstanding debts owed to the Town of Lovettsville and Loudoun County have been paid prior to filing this application.

Signature of Property Owner(s)	Printed Name of Property Owner(s)	Date
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(Attach sheet for additional Property Owners with their printed name(s) and date.)

Approved by the Zoning Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

-----Office Use Only-----

Date Application Received _____	Application Complete _____	Application Fee Paid _____
Loudoun County Personal Property Taxes Paid _____	All Fees/Taxes Owed to Town Have Been Paid (Including Auto Decal) _____	