

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

Construction Plans Application

Date Submitted: _			Fee: \$1,000 + \$25 per lot
Property Owner's Name:			
Address (Mailing):			
			Zip:
Telephone: Wor	k Mobi	ile	Fax
Owner's Representative (If Applicable):			
Address (Mailing)	ess (Mailing) E-Mail:		
Town/City:		State:	Zip:
Telephone: Wo	rk Mobil	e	Fax
Dronarty Information			
Property Information:			
Project Name and Section(s):			
Is the construction: Commercial Residential Mixed Zoning on Property:			
Is this a revision of a prior approved plan? Yes□ No□ If "yes", describe revisions:			
Tatal assess			
Total acres: Total number of lots: Total number of structures: Will now streets be constructed: Yes □ No□ If yes, will they be public □ or private □ 2			
Will new streets be constructed: Yes□ No□ If yes, will they be public □ or private □?			
Notes:			
Notes:			
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 Prope	erty Owner(s) Prin	ted Name of Property Owner(s)	Date
(Attach sheet for additional Property Owners with their printed name(s) and date.)			
Office Use Only			
Data Received Application Complete Application Fee Paid Restate Taxes Paid			