



**Fauquier County**  
**Department of Community Development**  
**29 Ashby Street, Suite 310**  
**Warrenton, VA. 20186**  
**540-422-8200 FAX 540-422-8201**  
[www.fauquiercounty.gov](http://www.fauquiercounty.gov)



**SPECIAL EXCEPTION CHECKLIST**

Project Name: \_\_\_\_\_

PIN(s): \_\_\_\_\_

	REQUIREMENT	YES	NO - State Reason
<b>I. Documentation</b>			
1	Completed <a href="#">Land Development Application</a> form, including indication of category/subcategory as appropriate.		
2	<a href="#">Fee Calculation Sheet</a> with fee check.		
3	Conflict of Interest Statement		
4	Special Exception Plat* - 24" x 36" - 10 copies folded <b>(see II. below)</b>		
5	Special Exception Plat* - 11" x 17" - 10 copies folded (see II. below)		
6	Fauquier County Parcel Identification Map, with subject property highlighted		
7	Statement of Justification - 10 copies (see III. below)		
8	Optional - Photographs of the property showing existing structures, terrain and vegetation - 10 copies		
9	Additional information as requested - 10 copies		
10	Flash drive containing individual PDFs of all submission materials		
11	Completed, signed Special Exception Application Checklist		

<b>II. Special Exception Plat Requirements</b>			
See Section 5.011 of Zoning Ordinance for details. Zoning Ordinance online at <a href="http://www.fauquiercounty.gov">www.fauquiercounty.gov</a>			
1	Drawn at approved scale.		
2	Boundaries of entire property, with bearings and distances on all boundary lot lines.		
3	Show the total area of the property in square feet or acres		
4	Scale and north arrow		
5	Show public right(s)-of-way, including names, route numbers and width.		
6	Indicate proposed means of ingress and egress to the property from a public street		
7	Show parking spaces, existing and/or proposed, indicating minimum distance from the nearest property line.		
8	Incorporate County Soil Survey Map or Type 1 Soil map if available, along with the "Summary of Soil Characteristics and Use Potential" for each mapping unit from the <a href="#">Interpretive Guide to Soils of Fauquier Co.</a> and 5-foot contours. State source and original scale.		

REQUIREMENT		YES	NO - State Reason
9	Where appropriate, a statement from the Health Department indicating that available facilities are adequate for the proposed use or indication that the subject property is served by public water and/or sewer.		
10	Include a map (3" X 3") showing vicinity of property		
11	Where applicable, seating capacity, usable outdoor recreation area, emergency access, bicycle parking, fencing, limits of clearing, landscaping and screening, outside lighting, loud speaker, required and/or proposed improvements to public right(s)-of-way.		
12	Include seal and signature of person certifying the plat.		

### III. Statement of Justification Requirements

1	The type(s) of operation(s)		
2	Hours of operation(s)		
3	Estimated number of patrons/clients/patients/pupils/ etc.		
4	Proposed number of employees, attendants, teachers etc.		
5	List qualifications of applicant and operators of the proposed use. Where applicable, submit a copy of professional or occupational certification or license.		
6	Provide estimate of traffic impact of proposed use, including the maximum expected trip generation and the distribution of such trips by mode and time of day.		
7	State vicinity or general area to be served by the use.		
8	For other than residential development, description of building façade and architecture of proposed new building or addition.		
9	A statement that the proposed use conforms to the provision of all applicable conditions, or if any waiver, exception or variance is sought by the applicant from such ordinance, regulations, standards and conditions, such shall be specifically noted with the justification for any such modification.		

### IV. Additional Requirements

1	See Article 5 of Zoning Ordinance under the specific category number for any additional submission requirements or standards that must be met.		
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### CERTIFICATION OF APPLICATION SUBMISSION

I hereby certify that the stated information is included in the attached special exception application and accompanying materials. Further, I have included on the plat any conditions required by proffers of an approved rezoning, or required by special exception or variance approval, special agreements or covenants.

\_\_\_\_\_  
Engineer or Surveyor's Signature

\_\_\_\_\_  
Firm Name