



Fauquier County
Department of Community Development
16 Courthouse Square
Warrenton, VA 20186
540-422-8200 FAX 540-422-8231
www.fauquiercounty.gov



SPECIAL PERMIT CHECKLIST

PROJECT NAME: _____

PIN(S): _____

REQUIREMENT	YES	NO – State Reason
Documentation		
Completed Land Development Application form, signed by the owner and applicant or agent.		
Conflict of Interest Statement		
Statement of Justification (See Below) – 10 copies		
Special Permit Plat (See Below) – 24" x 36" – 10 copies folded		
Special Permit Plat (See Below) – 11" x 17" – 10 copies folded		
Photographs of the property showing existing structures, terrain and vegetation (OPTIONAL).		
Fee Check		
A Traffic Impact Analysis (TIA) or a traffic assessment per Section 301B of the Design Standards Manual.		
Completed, signed Special Permit Checklist		
Any other information required by the provisions of Articles 4 or 5 or requested by the Board or Commission which may not be required as part of the original submission.		
Flash Drive containing PDFs of all submission materials.		
Statement of Justification		
Description of type of operation.		
Hours of operation.		
Estimated number of patrons/clients/patients/pupils/etc.		
Proposed number of employees/attendants/teachers/etc.		
Qualifications of applicant and operators of the proposed use. Where applicable, submit a copy of professional or occupational certification or license.		
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.		

