



RESOURCE PROTECTION AREA MODIFICATION PERMIT APPLICATION

COUNTY OF NEW KENT, VIRGINIA
WEB SITE: WWW.CO.NEW-KENT.VA.US

Office Use Only	
Application #:	_____
Date Received:	_____
Expiration Date:	_____
Application Fee: \$	_____
RPA Dev. Permit (\$95)	_____

◆ Environmental Department ◆ PO Box 150 ◆ 12007 Courthouse Circle ◆ New Kent, VA 23124 ◆
 ◆ Phone 804-966-8580 ◆ Fax 804-966-8531 ◆

PROPERTY OWNER

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

APPLICANT AND/OR CONTACT

Name (s): _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Email: _____

PROPERTY INFORMATION

Location: _____

GPIN: _____

Tax Map: _____ Lot Size: _____

Existing Land Use: _____ Date Recorded: _____

Directions to site: _____

PROJECT INFORMATION (Please attach additional sheets if necessary)

Description of Proposed Development: _____

Distance of Proposed Development to RPA Feature (horizontal straight line to closest point): _____

Description of Vegetation to be removed during the span of the project: _____

Description of Replacement Vegetation: _____

Total Amount of Land Disturbance (square feet): _____

You may be required to attach a site plan (and cross section if appropriate) of the proposed project including RPA/RMA delineation, permanent benchmarks showing location of proposed project, existing vegetation to be removed, and the proposed replacement vegetation. You may also be required to include E&S control practices, Best Management Practices (BMPs), and/or a Water Quality Impact Assessment.

Contract Purchasers: Please include a copy of the contract including the owner's consent.

Agents: Please include a signed statement from property owner authorizing permission to make application.

I, _____ (Print Name of Owner) hereby certify that I must comply with the provisions of Article II, Chesapeake Bay Preservation Areas and the NEW KENT COUNTY Erosion and Sediment Control Ordinance and Program, and that I accept responsibility for disturbance and stabilization for the above referenced project location as approved by the County. I grant the right of entry onto this property, as described above, to the designated personnel for NEW KENT COUNTY for the purpose of inspecting and monitoring for compliance with the aforesaid Ordinance. I understand that Permit application fees are nonrefundable.

Applicant(s) Signature/Date _____

Applicant(s) Signature/Date _____

DECISION: APPROVED DENIED Local Program Administrator: _____

Conditions/Comments: _____