



# Application for Deferral of Rezoning Request

County of Henrico, Virginia

4301 E. Parham Road, Henrico, Virginia 23228

Henrico Planning Web Site: <http://www.co.henrico.va.us/planning>

**Mailing Address:** Planning Department, P.O. Box 90775, Henrico, VA 23273-0775 Phone (804) 501-4602 Facsimile (804) 501-4379

Date: \_\_\_\_\_

Rezoning Case No.: \_\_\_\_\_

R. J. Emerson, Jr., AICP, Director  
Department of Planning  
P.O. Box 90775  
Richmond, VA 23273-0775

Dear Mr. Emerson,

In connection with rezoning case \_\_\_\_\_, I hereby request a \_\_\_\_\_ month deferment in decision on this case in order

\_\_\_\_\_.

Please be advised that this is a voluntary request on my part, and hereby waive the 100-day period of Section 15.2-2285 of the Code of Virginia under which the Planning Commission must make a recommendation to the Board of Supervisors. I also waive, by this voluntary request, the one-year period of Section 15.2-2286(A)(7) of the Code of Virginia under which the Board of Supervisors must act on a zoning case. I desire to have these periods begin to run from the date to which the Planning Commission defers my case as requested herein.

I acknowledge that the Planning Commission/Board of Supervisors is not obligated to grant the deferment, which I have requested. I also understand that if my request is granted, a \$100.00 fee is due and shall be promptly paid to the Department of Planning.

Sincerely,

\_\_\_\_\_

*\*If applicant is other than Owner, the Special Limited Power of Attorney Form must be submitted with this application.*