



PROFFER STATEMENT
County of New Kent, Virginia
Planning Department
Web site:
www.co.new-kent.va.us/209/Planning

OFFICE USE ONLY *DO NOT WRITE IN THIS BOX*	
Application #:	-
Date Received:	_____
Staff Initials:	_____

New Kent County ♦ Planning Department ♦ P O Box 150 ♦ New Kent, VA 23124 ♦ Phone 804-966-9690 ♦ Fax 804-966-8531
 Use P O Box for all mail. Street address: 12007 Courthouse Circle, New Kent, VA 23124 FOR DELIVERIES ONLY

Information and Instructions:

Sections 98-781 to 98-790 of the New Kent County Code govern the establishment of conditions at the time of rezoning of property. The proffer of conditions must be prepared and submitted voluntarily by the property owner. Conditions must be specific and must bear a direct relationship to the rezoning request. Conditions may not impose any obligations upon the County beyond the granting of the requested zoning.

Proffers or amendments thereto must be filed within (ten) 10 business days prior to the public hearing at which the rezoning request will be heard.

All property owners of record must sign the proffer statement before a Notary Public. If a person signs on behalf of a company or organization, or if someone other than the property owner signs, then a Power of Attorney Form will need to accompany the Proffer Statement.

I/We hereby voluntarily proffer that the development of the subject property of this application shall be in strict accordance with the conditions set forth below:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

Use Additional sheets if needed

 Applicant Agent Contract Purchaser

Date: _____

STATE OF VIRGINIA
CITY/COUNTY OF _____, TO-WIT:

This day _____ personally appeared before me, _____, a Notary Public in and for the County and State aforesaid, swore or affirmed that the matters stated in the foregoing Statement of Proffer are true to the best of his acknowledgement and belief. Given under my hand this _____ date of _____, 20____.

Notary registration No.: _____
My commission expires: _____

Notary Public

Applicant Agent Contract Purchaser

Date: _____

STATE OF VIRGINIA
CITY/COUNTY OF _____, TO-WIT:

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