



NORTHUMBERLAND COUNTY LAND USE APPLICATION

Answer all questions. Refer to Appendix A for the checklist to make sure that you have all required information. Please type or print all information in blue or black ink.

1. Owner/Applicant Information:

Owners Name: W.M. F. WEBSTER MS. DENISE WEBSTER		Address: 238N. SIOUX ROAD KILMARNOCK, VA. 22412
Telephone (H): 540-623-8194	Telephone (W):	Email:

Applicants Name: ROGER McKINLEY		Address: 691 MILL POINT DR. HEATHVILLE, VA. 22473
Telephone (H): 804-436-6484	Telephone (W): 804-724-8094	Email: (691)millpoint6541@gmail.com

Plan Preparer/Authorized Agent: R. McKel		Address: SAME
Telephone (H):	Telephone (W):	Email:

2. Property Information:

Tax Parcel #: 53A (5) 8-17 LOT 17, SEC. 17A-5-B-17		Parcel Physical Address (If applicable): 238N. SIOUX ROAD	
Current Zoning: <input type="checkbox"/> C-1 <input type="checkbox"/> A-1 <input type="checkbox"/> R-1 <input type="checkbox"/> R-2 <input type="checkbox"/> R-3 <input type="checkbox"/> R-4 <input type="checkbox"/> B-1 <input type="checkbox"/> M-1	Acreage: 0.762	Magisterial District: WICOMICO	Date Property Purchased: 2024, DEC.
Are there any structures on the property? <input checked="" type="checkbox"/> Yes (If yes, please describe) <input type="checkbox"/> No:			Deed Book Page #:
Board of Supervisor Representative: MR. JR. FISHER		What is the road name or route number on which your property is located? SIOUX ROAD	
Directions to Property: INDIAN CREEK ESTATES SIOUX ROAD			

Office Use Only:		Application #: 26-ZV-001	
DATE RECEIVED: 1-14-26	BOARD ACTION: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/ conditions <input type="checkbox"/> Denied <input type="checkbox"/> Withdrawn Meeting Date: 2-3-26	PAID STAMP: 	TYPE OF APPLICATION / FEE: <input type="checkbox"/> Appeal Decision of Zoning Administrator <input type="checkbox"/> Conditional Use - \$1000 <input type="checkbox"/> Conditional Use Boothouse - \$1000 <input type="checkbox"/> Conditional Use Solar - \$1500 <input type="checkbox"/> Exception to the Bay Act - \$500 <input type="checkbox"/> Subdivision Variance - \$500 Zoning <input checked="" type="checkbox"/> Variance - \$500

3. Description of Request:

Type of Request (check one):

- ☐ Conditional Use ☐ Exception to the Bay Act ☐ Subdivision Variance
☒ Zoning Variance

What is the current use? (Use another sheet of paper if more space is needed):

SINGLE FAMILY, RESIDENTIAL

Describe the proposed use/project (Use another sheet of paper if more space is needed):

THE APPLICANTS ARE PROPOSING TO CONSTRUCT AN ADDITION OF 891 SQ FT. ATTACHED TO THE EXISTING DWELLING.

Have you discussed this request with any State and/or Federal agencies that may require a permit? (Health Department, Virginia Department of Transportation, etc.)

- ☐ Yes (If yes, please explain)
☒ No

Have you previously applied to or obtained a permit from Northumberland County for any portion of this request or relating to this request?

- ☐ Yes (If yes, please explain)
☒ No

Has any portion of this request for which you are seeking a permit been completed or commenced?

- ☐ Yes (If yes, please explain)
☒ No

ADJOINING PROPERTY OWNERS

William E. Powell
P. O. Box 2018
Kilmarnock, VA 22482

John Hampton Childs Trustee &
Betty Jean Klotz Trustee
246 N Sioux Road
Kilmarnock, VA 22482

Todd R. or Patricia J. Childs
26 Sarrington CT
Stafford, VA 22554

5. Signature Page:

This application is submitted true and correct. Applicant agrees that when the permit herein applied for is issued, that all work will be completed as stated and as required by all Northumberland County Ordinances, Virginia State laws, and any other applicable regulations. Failure to comply with any part or terms of this application shall be sufficient cause to revoke any permit issued. This application allows duly authorized representatives of the County to enter upon the premises of the project site at reasonable times for the purpose of inspection.

Signature of Owner(s)

Date _____

Printed Name(s)

Signature of Applicant(s)

Date 01-05-25

Printed Name(s)

Signature of Agent

Date 01-05-25

Printed Name

The applicant and/or a representative shall be present at the hearing or the Boards will not hear the request.

Appendix F
Zoning Variance

Please submit this appendix with your application.

1. Please provide the following setbacks for all proposed structures:

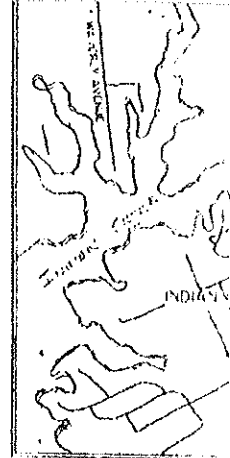
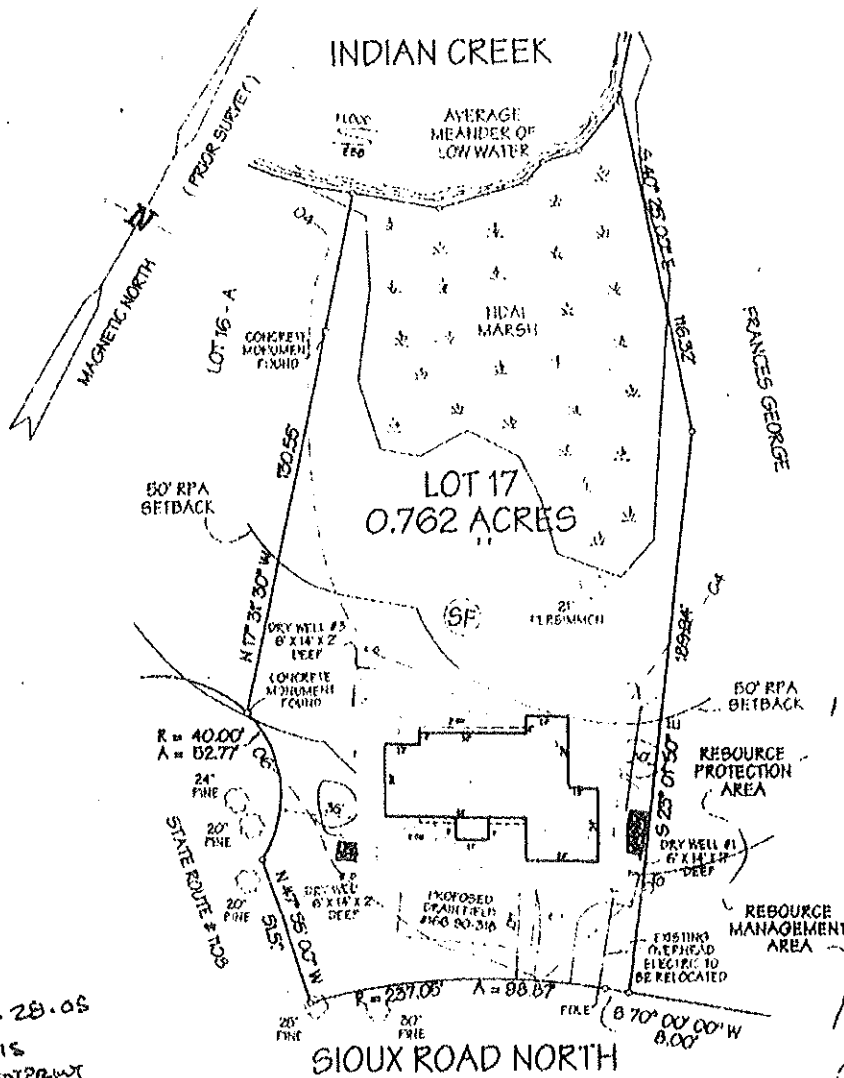
Primary Structure:	
Road/Right-of-way_____	Rear Yard_____
Left Side Line_____	Right Side Line_____
Height of Structure_____	
Secondary Structure:	
Road/Right-of-way_____	Rear Yard_____
Left Side Line_____	Right Side Line_____
Height of Structure_____	

2. Please answer the following questions:

Will there be any fencing or landscaping? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, describe and show on the site plan.) LEFT SIDE, EXISTING
Have all attempts been made to meet the current zoning regulations? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Please explain.) PLEASE SEE PLAN VIEW.

Office Use Only:
Part of application #: 26-ZV-001
Date Received: 1-15-26

PROPOSED ADDITION 238 N. SIOUX ROAD, NORTH KILMARNOCK, VA. 22482



ER
CC

THE PROJECT CONSISTS
GARAGE, DRAINFIELD AND
INCLUDE FOOTING CON-
GRADING

THE PROJECT IS GENER-
SHOWN HEREON AND IN
DIRECTION TOWARDS THE

THE SOIL WITHIN THE
NEARLY LEVEL PHASE A
LOAM IS A WELL DRAIN-
AND LOAMY SAND AT A
RANGES FROM DARK TO
SANDY LOAM AND FROM
FROM YELLOWISH BROWN
TO SILTY CLAY LOAM AT
DEPTH TO SANDIER SEC-
28 TO 46 INCHES THIS
MATERIAL AND GOOD AS
NO CRITICAL EROSION AP-

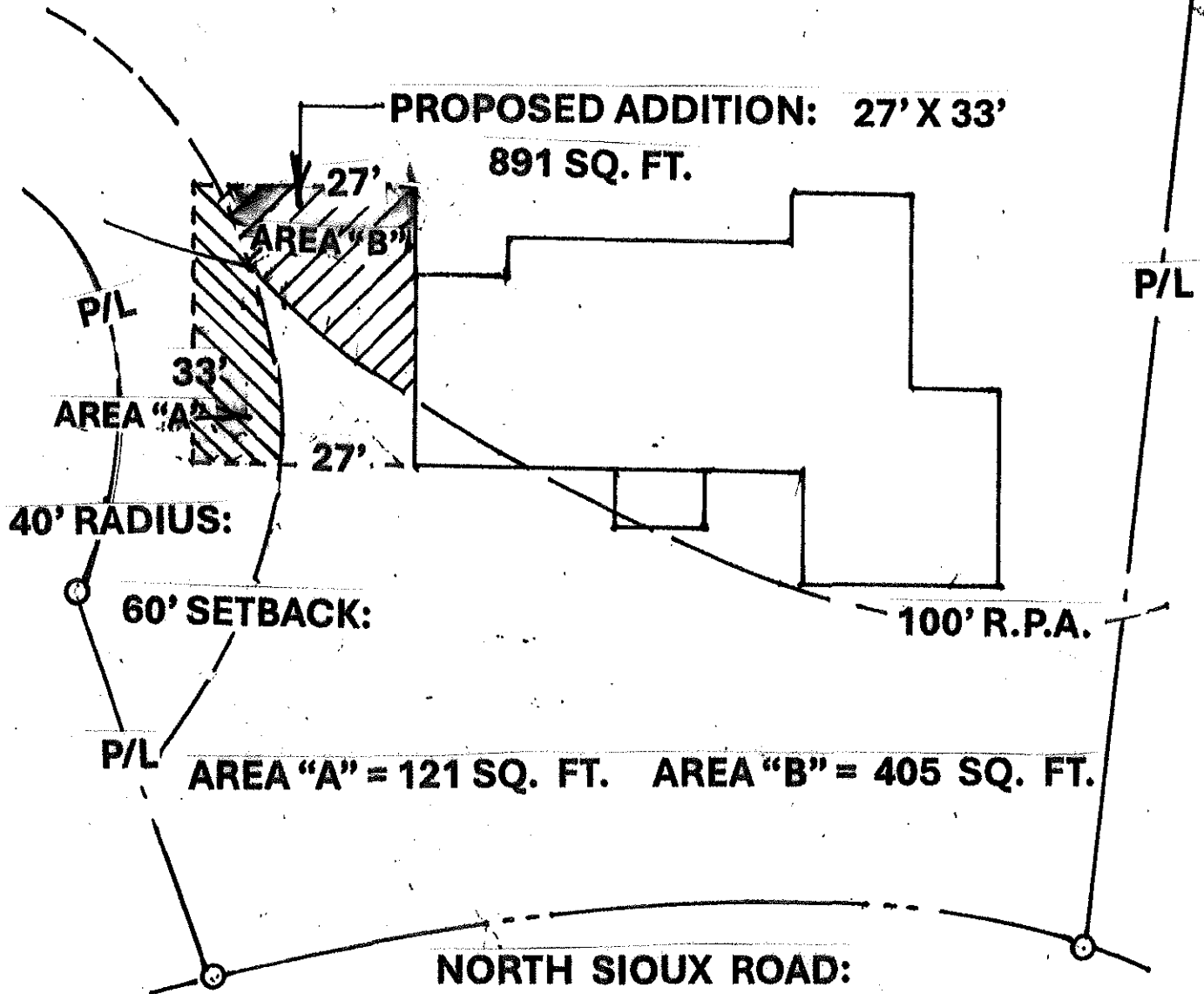
4-28-06
THIS
Footprint

LOT LOCATION SURVEY:

ROGER MC KINLEY, INC.
691 MILL POINT DRIVE
HEATHSVILLE, VA. 22473
804-724-8094

MR. WILLIAM F. WEBSTER
MRS. DENISE WEBSTER
LOT 17, SEC. 53A-5-08-17
INDIAN CREEK ESTATES

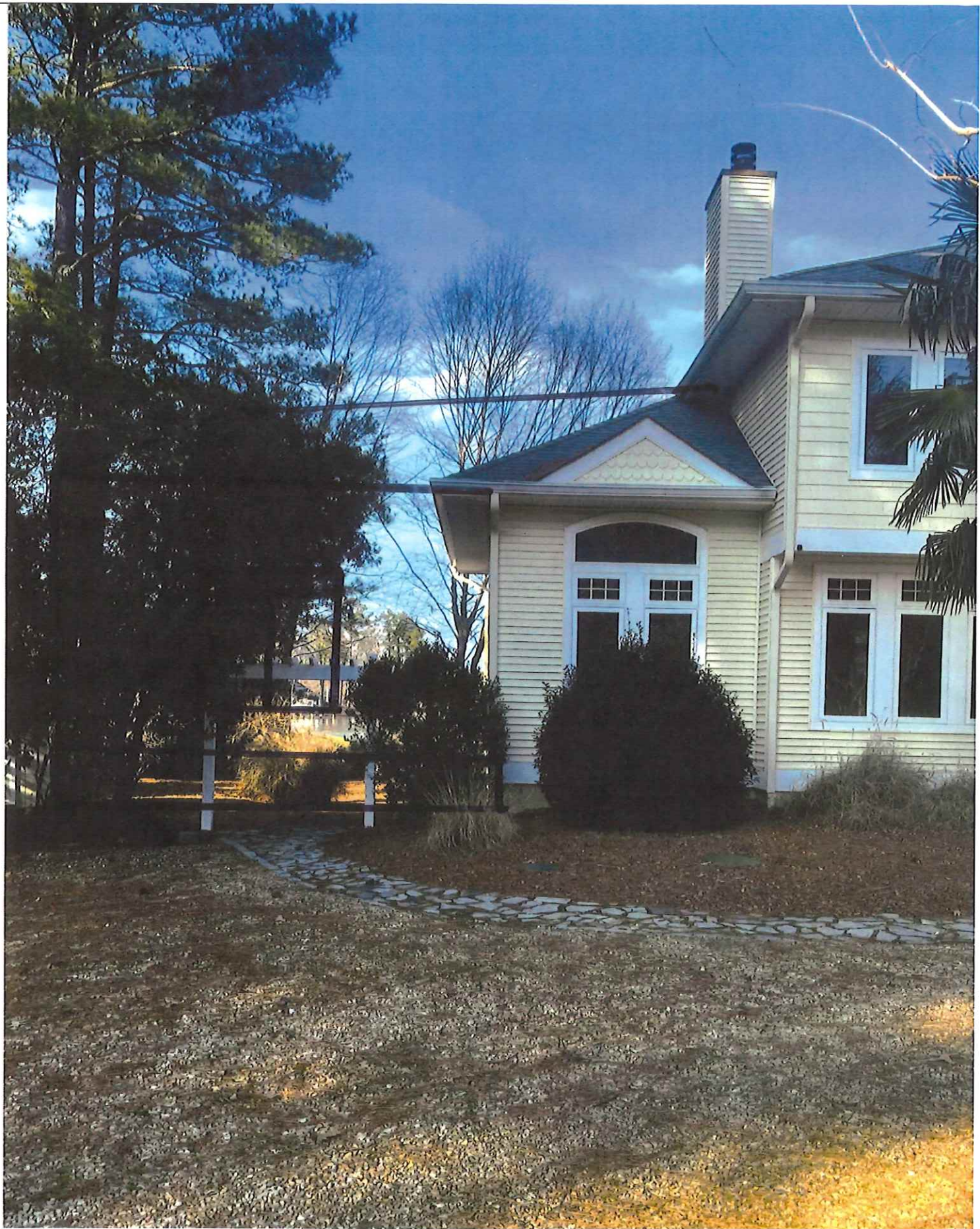
PROPOSED ADDITION
238 N. SIOUX ROAD, NORTH
KILMARNOCK, VA. 22482



SCALE: 1" = 20'

ROGER MC KINLEY, INC.
691 MILL POINT DRIVE
HEATHSVILLE, VA. 22473
804-724-8094

MR. WILLIAM F. WEBSTER
MRS. DENISE WEBSTER
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BLUFF POINT INLET