



**PRINCE WILLIAM COUNTY**  
**Department of Development Services – Land Development Division**

**CONCURRENT PROCESSING AFFIDAVIT**

*Concurrent processing fee in accordance with the most recently adopted [fee schedule](#) is payable to the Land Development Division at Quality Control Site Plan Submission.*

STATE OF VIRGINIA  
COUNTY OF PRINCE WILLIAM

This \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
(Day) (Month) (Year)

I, \_\_\_\_\_  
(Owner/Contract Purchaser/Authorized Agent)

notify Prince William County that my application for special use permit / rezoning requesting: \_\_\_\_\_

will be processed concurrently with the site development plan. I understand that the site development plan cannot be approved by the County unless the special use permit / rezoning application has been granted by the Board of County Supervisors. Furthermore, I understand that the review of the site development plan will in no way prejudice the review or approval of the special use permit / rezoning application. I also understand that approval of the site plan will not grant development rights if the uses shown thereon are not approved by the Board of County Supervisors when it moves on the special use permit / rezoning.

I hereby knowingly waive any claim that the expenditure of funds used in preparation of the site development plan will provide me and my successors or assigns any rights to the approval of said special use permit / rezoning application. If the special use permit / rezoning application is denied by the Board of County Supervisors, I understand that the site development plan will become null and void, the site development file closed, and no review fees refunded.

\_\_\_\_\_  
Owner / Contract Purchaser / Authorized Agent  
(circle one)

\_\_\_\_\_  
Print Name and Title

COMMONWEALTH OF VIRGINIA:

County of \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ in my County and State aforesaid, by the aforementioned Principal.

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Commission Expires

*Staff Use Only*

File/Case #: \_\_\_\_\_

Date Site/Subdivision Plan can be accepted for review: \_\_\_\_\_

Signature of Case Planner: \_\_\_\_\_