

**COMMONWEALTH OF VIRGINIA**  
**County of Fluvanna**  
**Certification of Qualification**  
**Family Subdivision Application**

**Owner of Record:** \_\_\_\_\_ Total Acreage: \_\_\_\_\_  
 Address: \_\_\_\_\_ Tax Map and Parcel(s): \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Is property in Agricultural Forestal District?  No  Yes  
 Email: \_\_\_\_\_ If Yes, what district: \_\_\_\_\_

**Certification of Owner**

I, \_\_\_\_\_ do hereby certify that the subdivision of property under my ownership specified above is a Family Division as defined by Section 15.2-2244 of the Code of Virginia for the purpose of exemption from the Fluvanna County Subdivision Ordinance and must be recorded in the name of a member of the immediate family to qualify (spouse, child, grandchild, parent, sibling, grandparent). Those family members identified to receive the lots subdivided in this manner are:

**Immediate Family Member**

**Relation to Owner**

<b>Lot 1:</b> _____	_____
<b>Lot 2:</b> _____	_____
<b>Lot 3:</b> _____	_____
<b>Lot 4:</b> _____	_____
<b>Lot 5:</b> _____	_____

I further certify that the property owner and the recipients of the family division lots have not given or received any other divisions created in this manner (if so, please file a separate form for each such subdivision) and that this division is not for the purpose of circumventing the subdivision ordinance. Lots using the family division process must remain in the hands of the qualified member of the immediate family for at least thirty-six(36) months prior to any transfer to remain valid, unless the Subdivision Agent determines there is a compelling need as defined by the subdivision ordinance.

Attested to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**Owner:** \_\_\_\_\_ **Recipient:** \_\_\_\_\_

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**Owner:** \_\_\_\_\_ **Recipient:** \_\_\_\_\_

**Notary Statement:** Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**My Commission expires:** \_\_\_\_\_ **Notary Public:** \_\_\_\_\_

**All plats must be folded prior to submission to the Planning Department for review. Rolled plats will not be accepted**

OFFICE USE ONLY		
Date Received:	Fee Paid:	Application #: <b>SUB</b> _____ :
Election District:	Planning Area:	Number of Lots:
Plat: \$200.00	Approval/Denial Date:	
GIS Fee: \$ 50.00 per lot (residue is considered a lot)		