



**LAND USE PERMIT
LUP-SEA
Special Event Approvals**

APPROVAL DATE _____
COUNTY ADMINISTRATOR / TOWN MANAGER OR DESIGNEE Name and Signature

Remarks: _____

APPROVAL DATE _____
LOCAL LAW ENFORCEMENT AGENCY Name and Signature

Remarks: _____

APPROVAL DATE _____
VIRGINIA STATE POLICE (Sergeant/Area/Division) Name and Signature

Remarks: _____

APPROVAL DATE _____
VDOT REPRESENTATIVE Name and Signature

Remarks (include any changes that may be made by VDOT): _____

- Cc: County/Town Administration
 Local Law Enforcement
 Virginia State Police
 VDOT Residency Office / Maintenance AHQ