



CASE #: \_\_\_\_\_  
 FEE AM'T: \_\_\_\_\_  
 DATE PAID: \_\_\_\_\_

Rouss City Hall  
 15 North Cameron Street  
 Winchester, VA 22601  
 540-667-1815  
 TDD 540-722-0782

## APPLICATION FOR BOARD OF ZONING APPEALS

**Please print or type all information**

\_\_\_\_\_ Applicant

\_\_\_\_\_ Telephone \_\_\_\_\_ Street Address

\_\_\_\_\_ E-mail address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

\_\_\_\_\_ OWNER'S SIGNATURE (use reverse to list additional owners) \_\_\_\_\_ Owner Name (as appears in Land Records)

\_\_\_\_\_ Telephone \_\_\_\_\_ Street Address

\_\_\_\_\_ E-mail address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

**REQUEST TYPE CODE** - Please mark type of request and complete information

**KEY:** V = Variance; AM = Administrative Modification; I = Interpretation

REQUEST TYPE	ORDINANCE SECTION	PERTAINING TO:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**APPLICATION FEE:** \$500 for 1st code section; \$100 for each additional code section  
**Public hearing sign deposit fee:** \$50

**PROPERTY LOCATION**

Current Street Address(es) \_\_\_\_\_ Zoning \_\_\_\_\_

Tax Map Identification - (sections, blocks, lots) \_\_\_\_\_

**REQUIRED MATERIALS LIST**

- \_\_\_\_\_ 1 copy of application (this form completed)
- \_\_\_\_\_ 10 copies of letter explaining request and grounds for request
- \_\_\_\_\_ 10 Copies of plans/or drawings and surveys
- \_\_\_\_\_ Fee (check made payable to the **Treasurer, City of Winchester**)
- \_\_\_\_\_ List of adjacent property owners (public hearing items only). List must provide name and mailing address as appears in Land Records for owners of all properties within 300 feet of any portion of the subject site. If provided by staff, there is a \$25 fee.
- \_\_\_\_\_ Disclosure of Real Parties in Interest (list all equitable owners)
- \_\_\_\_\_ Public Hearing Sign Deposit Fee - \$50 (refundable upon return of sign)

All public hearing materials must be submitted at one time by 5:00 PM on the deadline date for the next regular meeting in order to be placed on the agenda. Only complete applications, which include the above materials, will be accepted.

I/we hereby certify that the above information is complete and correct and that public notification will be properly posted on the site not later than 14 days before the public hearing (if applicable) and that all delinquent real estate taxes have been paid per Section 23-9.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

CASE #: \_\_\_\_\_  
FEE AM'T: \_\_\_\_\_  
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Additional Owner's Name

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Address

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City, State, Zip

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Telephone

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OWNER'S SIGNATURE

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Additional Owner's Name

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Address

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City, State, Zip

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Telephone

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OWNER'S SIGNATURE

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Additional Owner's Name

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Address

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City, State, Zip

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Telephone

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OWNER'S SIGNATURE

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Additional Owner's Name

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Address

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City, State, Zip

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Telephone

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OWNER'S SIGNATURE