



Board of Zoning Appeals  
**Application for Variance**

BZA # \_\_\_\_\_

Hearing Date: \_\_\_\_\_

Applicant Information	Property Information
Name:	Address:
Address:	Tax Map and Parcel:
Phone:	Zoning District:
Agent Name, Address and Phone Number: (if other than applicant)	Property Owner and Mailing Address: (if other than applicant)

**IMPORTANT:** This application must be typed or legibly printed and filed with the Planning Department in person or by mail to 915 Quarrier Street, Suite 1 Charleston, WV 25301. The following items must accompany this application: 1) a site plan drawn to scale; 2) a list of the owners, with their mailing addresses, of the properties within a 100 foot radius of the property for which the variance is being sought; 3) \$125.00 filing fee in the form of a check or money order made payable to the City of Charleston. You are also encouraged to submit any additional information, including photographs, elevations, testimonials or other documentation, which may support your application. You or your representative must be present at the scheduled public hearing in order to present your request and answer questions. THE PLANNING DEPARTMENT WILL NOT ACCEPT ANY INCOMPLETE APPLICATIONS.

Please describe the variance request. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicable Section(s) of the Zoning Ordinance \_\_\_\_\_

Please describe the proposed work to be done on the property. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In comparison with other properties in the vicinity and under the same zoning regulations, what is unusual or different about the subject property or the intended use of the subject property that represents a hardship, making it difficult for you to comply with the zoning regulations? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If your variance request is granted, how will others in the area be affected? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will your request devalue the property of others in the vicinity by altering land use characteristics or diminishing the marketable value of adjacent land and structures or increasing congestion on public streets? Why or why not?

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Explain how your request is consistent with the purposes and intent of the Zoning Ordinance of the City of Charleston.

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I hereby affirm that all of the statements and information contained in or filed with this application are true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Planning Department Use Only**

The following is a list of related cases:

The following is a list of zoning ordinance violations, building code violations and enforcement actions relating to the subject property:

Application reviewed by:

Action:  Approved  Rejected

If approved, were there any specific conditions or limitations imposed by the BZA?

\_\_\_\_\_  
*Planning Official Signature and Title*

\_\_\_\_\_  
*Date*