

Jefferson County, West Virginia Department of Engineering, Planning and Zoning

Office of Planning and Zoning 116 E. Washington Street, 2nd Floor

116 E. Washington Street, 2nd Floor P.O. Box 716 Charles Town, West Virginia 25414

File #:	
Mtg Date:	
Date Rec'd:	
Fees Paid:	
Staff Int:	
List of Adjoiners:	

 $Email: \underline{planning department@jefferson countywv.org}$

zoning@jeffersoncountywv.org

<u>countywv.org</u>

Phone: (304) 728-3228
Fax: (304) 728-8126

Planning Commission Waiver Request									
Waivers must comply with Division 24.300 of the 2008 Subdivision Regulations, as amended.									
Property Owner	Information								
Owner Name:									
Business Name:									
Phone Number:	Email:	_							
Applicant Contact Information									
		Same as owner: □							
Business Name:									
Phone Number:	Email:								
Consultant Infor	mation								
Name:									
Business Name:									
Mailing Address:									
Phone Number:	Email:								
Physical Propert									
Physical Address:		Vacant Lot: □							
Tax District:		Parcel No:							
Parcel Size:	Deed Book:	Page No:							
Zoning District:									
On a separate sheet of paper sketch the shape and location of the lot. Show the location of the intended construction or land use and indicate building setbacks, size, and height. Identify existing easements, roads, buildings, structures, or land uses on the property. Sign and date the sketch.									
☐ Include	d	e a vicinity map if a sketch is not applicable)							
What Section of the Subdivision Regulations and year of the Regulations are you requesting to Waive?									
Briefly Describe the Nature of Your Waiver Request:									

Explain how the design of costs, greater open space						
Explain how the waive rights of adjacent prop			ct the public health,	safety, or welfare o	or the	
Explain how the waive	r, if granted, will	be in keeping witl	the intent and purp	oose of this Ordinar	ice.	
Explain how the waive	r, if granted, will	result in a project	of better quality an	d/or character.		
By signing this application taking photos for the Plann		_	_	<u> </u>	-	
Property Owner/App	licant Signature	Date	Property Owner/App	licant Signature	Date	
	N	otification Requir	ements			
The subject parcel shall public hearing. The plac owner name and address mailed by Staff least 14	be posted with a m ard(s) will be preparation shall	inimum of one 28' ared by the Staff and be provided by the	'x 22" placard at leas nd posted by the appli	cant. Adjacent prope	erty	
Public Hearing Date		Date Placard Pos	sted	Date Adjoiners M	Iailed	
Planning Commission Determination						
Approved \square		Denied	Dat	e: / /	_	