



Jefferson County, West Virginia
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Office of Planning and Zoning
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West Virginia Alcohol Beverage Control Request Form

A Zoning Form (located in the [WV ABC packet](#)) must be originally signed and submitted with this form.

Property Owner Information

Owner Name: _____
 Business Name: _____
 Mailing Address: _____
 Phone Number: _____ Email: _____

Applicant Information

Same as Owner:

Applicant Name: _____
 Business Name: _____
 Mailing Address: _____
 Phone Number: _____ Email: _____

Physical Property Details (click for an interactive [Tax Map](#))

Physical Address: _____
 Tax District: _____ Map No: _____ Parcel No: _____
 Parcel Size: _____ Deed Book: _____ Page No: _____

Zoning District (click for an interactive [Zoning Map](#))

Describe the existing/proposed land use.

Complete Below

Has a Zoning Certificate been issued for the proposed or existing land use? Yes No

*If known, please provide the Zoning Certificate Number: ZC _____

Is the subject parcel an existing nonconforming land use (grandfathered)? Yes No

Business name and/or history of nonconforming use, if known.

Office Response

Approved Denied Date: ____ / ____ / ____ Initials: _____