

**CITY OF WEIRTON - ADMINISTRATIVE APPEAL
BOARD OF ZONING APPEALS**

**APPLICANT
INFORMATION**

NAME			
PHONE			
ADDRESS	CITY	STATE	ZIPCODE
Attachment to Application No.:		DATE:	

**PROPERTY OWNER
/ PROPERTY
ADDRESS (if same as
applicant, write SAME) /**

NAME	
PHONE	
ADDRESS	

**NARRATIVE OF
ZONING DECISION**

ATTACHMENT(S)

YES

NO

SUPPORTING INFORMATION: Attach a narrative statement relative to your plan and the requirements of the ordinance

NO

Date: