



**BOARD OF ZONING APPEALS**

747 Northern Avenue | Hagerstown, MD 21742 | P: 240.313.2430 | F: 240.313.2461 | Hearing Impaired:

7-1-1 WWW.WASHCO-MD.NET

**Appeal for Variance**

Appeal is hereby made for a variance from a requirement of the Washington County Zoning Ordinance as follows:

Location \_\_\_\_\_

Appellant's present legal interest in above property: (Check One)

\_\_\_\_\_ Owner (Including Joint Ownership)    \_\_\_\_\_ Lessee    \_\_\_\_\_ Contract to rent/lease  
\_\_\_\_\_ Contract to Purchase    \_\_\_\_\_ Other \_\_\_\_\_

Specify the Ordinance section and subsection from which the variance is desired:  
\_\_\_\_\_

Specify the particular requirement(s) from which a variance is desired in that section or subsection:  
\_\_\_\_\_  
\_\_\_\_\_

Describe the nature and extent of the desired variance from Ordinance requirements: listed above:  
\_\_\_\_\_  
\_\_\_\_\_

Describe reason(s) why the Ordinance requirement(s) in question would result in peculiar and/or unusual practical difficulties to or would impose exceptional or undue hardship upon the owner of the property if the requested variance were not granted:

**Provide Detailed Explanation on Separate Sheet**

Has any previous petition or appeal involving this property been made to the Board?  
\_\_\_\_\_ Yes    \_\_\_\_\_ No

If yes, list docket number(s): \_\_\_\_\_

I hereby certify that I have, to the best of my knowledge, accurately supplied the information required for the above referenced appeal.

\_\_\_\_\_  
Signature of Appellant

\_\_\_\_\_  
Address and of Appellant

\_\_\_\_\_  
Email of Appellant

\_\_\_\_\_  
Phone Number of Appellant

This appeal form is to be used to assist the customer in gathering the information necessary to submit an application. However, the application shall be processed in person.