



Arlington County, Virginia
DEPARTMENT OF COMMUNITY PLANNING,
HOUSING AND DEVELOPMENT
PLANNING DIVISION
ZONING ADMINISTRATION

APPLICATION FOR APPEAL OF ANY ORDER, REQUIREMENT, DECISION OR DETERMINATION

DATE: \_\_\_\_\_

BOARD OF ZONING APPEALS
2100 Clarendon Blvd, Suite 1000
Arlington, Virginia 22201

Name of Appellant: \_\_\_\_\_

If Appeal relates to a specific property, provide the following information:

Address: \_\_\_\_\_ Lot(s) \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Civic Association: \_\_\_\_\_

Nature of the Appeal: \_\_\_\_\_

Date of Order, Requirement, Decision, Determination or Notice of Violation being Appealed: \_\_\_\_\_

How is the Appellant an Aggrieved Person?: \_\_\_\_\_

Make checks payable to: Treasurer of Arlington County

Form box containing fields: ZONE, PROPOSAL FILED, FEE DEPOSITED, C.R.I.F. NO., FEE, RECEIVED BY, Previous Cases

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

Zip \_\_\_\_\_ Daytime Telephone \_\_\_\_\_

Agent Contact Information:

Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

Zip \_\_\_\_\_ Telephone \_\_\_\_\_