



**CITY OF FAIRFAX, VIRGINIA**

**APPLICATION PACKAGE  
NOTICE OF APPEAL  
BOARD OF ZONING APPEALS**

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BOARD OF ZONING APPEALS**



**CITY OF FAIRFAX**  
**Department of Community Development and Planning**  
10455 Armstrong Street, Annex Room 207  
Fairfax, VA 22030

**TO THE APPLICANT:**

To assist you in completing your notice of appeal, an application is attached for your use. Please follow the instructions carefully, as no appeal will be processed until all required materials are submitted to the Zoning Office (Room 207A, City Hall). A notice of appeal must be submitted in writing within 30 days of the final decision which is the subject of the appeal.

Zoning Ordinance §6.21 provides that where it is alleged there is error in any order, requirement, decision or determination in the enforcement of the text of City Code Chapter 110 (Zoning Ordinance) and where there is any uncertainty as to the location of a district boundary, and interpretation is needed to carry out the intent and purpose of this chapter for the particular section or district in question, an administrative appeal may be submitted. The administrative appeal process is not applicable for appealing decisions of the Board of Architectural Review, or for decisions of the Zoning Administrator on subdivisions and administrative adjustments.

The written notice of appeal must be submitted in accordance with Zoning Ordinance §6.2.3 and must show that the applicant has an immediate, pecuniary and substantial interest in the litigation, and not a remote or indirect interest. Once a fully completed notice application, fee and all mandatory information as may be required by the Zoning Administrator is received by the Secretary for the Board of Zoning Appeals and deemed complete, the notice of appeal will be distributed to the Board and the Zoning Administrator. The decision of the Board will be made within 90-days from the filing of the notice of appeal and public notice given in accordance with §6.2.5 of the Zoning Ordinance. The written decision will be forwarded to the applicant by first class mail within five (5) days after final decision.

Final decisions of the Board of Zoning Appeals may be appealed to Circuit Court within 30 days of the decision in accordance with §6.21.10 and §6.23.

If you have any questions pertaining to this appeal process please contact the Department of Community Development and Planning as follows:

- |                                                  |                                                                                                                               |
|--------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| <b>DIRECTOR.....</b>                             | <b>Brooke Hardin</b><br><a href="mailto:brooke.hardin@fairfaxva.gov">brooke.hardin@fairfaxva.gov</a><br>703-385-7930          |
| <b>SECRETARY TO BOARD OF ZONING APPEALS.....</b> | <b>Saron Getahun</b><br><a href="mailto:Saron.getahun@fairfaxva.gov">Saron.getahun@fairfaxva.gov</a><br>703-385-7820          |
| <b>ZONING ADMINISTRATOR.....</b>                 | <b>Joseph Eisenberg</b><br><a href="mailto:joseph.eisenberg@fairfaxva.gov">joseph.eisenberg@fairfaxva.gov</a><br>703-385-7820 |



Application #: \_\_\_\_\_

Receipt #: \_\_\_\_\_

**NOTICE OF ADMINISTRATIVE APPEAL – BOARD OF ZONING APPEALS**

☐ **Determination of Zoning/Proffers/Conditions §5.6.2.A**

☐ **Sign Permits §6.9**

☐ **Floodplain Permits §6.11**

☐ **Chesapeake Bay Preservation Reviews §6.13**

☐ **Interpretations/Determinations §6.19.5**

☐ **Notice of Zoning Violation §8.4.4**

☐ **Site Plan Reviews §6.8**

☐ **Tree Removal Permits §6.10**

☐ **Erosion/Sediment Control Permit §6.12**

☐ **Temporary Use Permit §6.15**

☐ **Zoning Permits §6.20**

☐ **Order of the Zoning Administrator §8.4.4**

1. ☐ **APPLICANT** or ☐ **AUTHORIZED AGENT INFORMATION** (check as appropriate)

Applicant Name \_\_\_\_\_ (circle one): Corporation / Gen Partnership / Ltd Partnership / Sole Proprietorship / Individual

Applicant Address \_\_\_\_\_

Phone (o) \_\_\_\_\_ (c) \_\_\_\_\_ Email \_\_\_\_\_

Applicant or Authorized Agent Signature \_\_\_\_\_

Relationship to project (circle one): Property owner / Contract purchaser / Lessee / Agent

2. **PROPERTY INFORMATION**

Property Address \_\_\_\_\_ Tax Map # \_\_\_\_\_

Project/Development Name \_\_\_\_\_

3. IN THIS SECTION DESCRIBE ACTION OF THE ZONING ADMINISTRATOR BEING APPEALED, GROUNDS FOR THE APPEAL AND INDICATE HERE ☐ IF ANY SITE PLANS, PLATS, MAPS OR OTHER DOCUMENTS ARE ATTACHED SEPARATELY.

I hereby appeal the Zoning Administrator's decision to the Board of Zoning Appeals under the provisions of City Code Section §110-6.21 and certify that the appellant is the owner of the subject property or is authorized by the owner of the subject property to file this appeal. Date the owner of the subject property took title: \_\_\_\_\_

Applicant or Authorized Agent Signature **(REQUIRED)** \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*OFFICE USE ONLY\*\*\*

Case Number: \_\_\_\_\_ Fee Receipt: \_\_\_\_\_ Intake By: \_\_\_\_\_