



CITY OF MARTINSBURG
WEST VIRGINIA

A NON-REFUNDABLE \$100.00 FILING FEE SHALL ACCOMPANY EACH APPEAL PETITION

CITY OF MARTINSBURG
CODE APPEALS BOARD

Date Filed: _____

Appeal No.: _____

PETITION FOR APPEAL

To: CITY OF MARTINSBURG
CODE APPEALS BOARD
232 N. Queen Street
Martinsburg, West Virginia 25401

Date: _____

Name of Owner or Authorized Agent: _____

Address: _____

Telephone Number: _____

Location of Structure or Building: _____

In compliance with _____ the Municipal Code for the City of
Martinsburg, I/We hereby request a hearing before the Code Appeals Board and as grounds therefore
state as follows: (Please state the reasons for this request and the relief which you are requesting):

Sworn to me this _____

day of _____, 200_____

(Appellant's Signature)

(Notary)

STATE OF _____

COUNTY OF _____, To wit:

I, _____, a Notary Public of said County, do hereby
certify that _____, whose name is
signed to the writing above, bearing the date this _____ day of _____, 200_____,
has this day acknowledged the same before me in my said County.

Given under my: hand (and official seal) this _____ day of _____, 2000.

My commission expires: _____.