Harrison County Commission Meeting
Wednesday, June 10, 2026
10:00 A.M.

The Harrison County Commission Meeting is held on the 3rd floor of the Harrison County General Services Building (229 South 3rd St.), if you are unable to attend in person, you may join and listen via Zoom Conference Call by the following steps. Public participation will only be allowed during public comment period and/or scheduled appointments.

Join Zoom Meeting

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https://us02web.zoom.us/j/7628160712

Dial: 1-646-568-7788

Meeting ID: 762 816 0712

Passcode: 26301

NEW BUSINESS – Action Items for Consideration or Approval:

1. **Review—Discuss—Consider** Budget Revisions for the following:
   - **A.** General County
   - **B.** Vital Services
2. **Review—Discuss—Consider** Letter to the West Virginia Alcohol Beverage Administration
   - **A.** Foul Cloud, LLC
     1391 E Pike Street
     Clarksburg, WV 26301
   - **B.** Foul Cloud, LLC
     1489 Milford Street
     Clarksburg, WV 26301
3. **Review—Discuss—Consider** Budget Discussions

Zoning Form

Note: If an establishment's location is not situated within a municipality, this office will need a letter from the County Commission stating that the establishment location is zoned properly. All applicants must complete the front portion of the form.

To: Municipal Clerk or Recorder

Under the requirements set forth in W.Va. Code §16-9H-1 *et seq.*, a person intending to apply for a license to operate a WVABCA licensed Vape or Smoke Shop must meet licensure requirements. The WVABCA requires that any Vape or Smoke Shop applying to operate at any location within a municipality **must file a notice of such intention with the Clerk or Recorder of such municipality at least ten (10) days prior** to filing an application for such license with the WVABCA. Pursuant to this requirement, **notice** is herein given that the following intends to apply to the WVABCA for a license to operate a Vape or Smoke Shop pursuant to the provisions of W.Va. Code §16-9H-1 *et seq. and 175 CSR 12.*

Entity Name: Foul Cloud LLC

DBA (Doing Business As): _____

Address of Establishment: 1391 E Pike Street Clarksburg WV 26301
(Street/Route) (City) (State) (Zip Code)

Applicant's Name(s): Antrobius Zachary J
(Last) (First) (Middle)

_____
(Last) (First) (Middle)

*Use additional sheet for signatures if needed.

General Description of Premises: Vape Shop

_____

This Notice has been filed with the Clerk or Recorder of the City/Town of

_____ **on this** _____ **day of** _____, _____.

Applicant's Signature(s): _____ Date: 6-5-26.

_____ Date: _____.

(Municipality is to fill out the reverse side of the form)

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Entity Name: Four Cloud LLC

DBA (Doing Business As): _____

Address of Establishment: 1489 Milford St. Clarksburg WV 26301
(Street/Route) (City) (State) (Zip Code)

Applicant's Name(s): Antrobius Zachary J
(Last) (First) (Middle)

_____
(Last) (First) (Middle)

*Use additional sheet for signatures if needed.

General Description of Premises: Vape shop

_____

This Notice has been filed with the Clerk or Recorder of the City/Town of

_____ **on this** _____ **day of** _____, _____.

Applicant's Signature(s): _____ Date: 6-5-24.

_____ Date: _____.

(Municipality is to fill out the reverse side of the form)