

Application to the Zoning Board of Appeals

Address of Property: _____ Map ____ Parcel ____

Applicant Name: _____

Property Owner of Record: _____

Signature of Applicant: _____

Address of Applicant if different than property address: _____

Town and State _____

Telephone Number _____ Email _____

To the Zoning Board of Appeals, Town of North Reading, Massachusetts, the undersigned hereby applies for:

	Required frontage	Met	Side	Met	Rear	Met
____ Variance	District	____	____	____	____	____
	(Example RA	40		25	50)

- What is the variance for and why are you seeking a relief from the ZBA:

- _____
- Plot Plan attached showing the proposed project and the setbacks to the lot lines along with the location of the leachfield and septic tank.

____ Special Permit – describe reasons for seeking Special Permit: _____

____ Home Occupation/Special Permit – Type of Business _____

Business Name _____

Where in house _____

____ Appeal Decision of Building Inspector

____ Special Permit Aquifer

Additional Comments _____

If the applicant is not the owner of record, a letter from the property owner to the Zoning Board of Appeals giving permission to the applicant to apply to the ZBA must accompany this application

DO NOT WRITE BELOW THIS LINE

Town Clerk _____ Application# _____