

**APPLICATION FOR AN EQUITABLE WAIVER
OF DIMENSIONAL REQUIREMENTS**

To: Board of Adjustment, Town of _____

Name of Applicant _____

Address _____

Owner _____
(if same as applicant, write "same")

Email Address _____ Phone _____

Location of Property _____
(street, number, sub-division and lot number)

Map & Lot _____ Town Water? YES or NO Town Sewer? YES or NO

NOTE: This application is not acceptable unless all required statements have been made.

Additional information may be supplied on a separate sheet if the space provided is inadequate.

**APPLICATION FOR AN EQUITABLE WAIVER OF DIMENSIONAL
REQUIREMENTS**

An Equitable Waiver of Dimensional Requirements is requested from article _____ section
_____ of the zoning ordinance to permit _____

1. Does the request involve a dimensional requirement, not a use restriction?

() yes () no

2. Explain how the violation has existed for 10 years or more with no enforcement action,
including written notice, being commenced by the town. _____

- or -

Do not write in this space.

Case No. _____

Date Filed _____

(signed - ZBA)

Explain how the nonconformity was discovered after the structure was substantially completed or after a vacant lot in violation had been transferred to a bona fide purchaser. _____

- and -

How the violation was not an outcome of ignorance of the law or bad faith but resulted from a good faith error in measurement or calculation. _____

3. Explain how the nonconformity does not constitute a nuisance nor diminish the value or interfere with future uses of other property in the area. _____

4. Explain how the cost of correction far outweighs any public benefit to be gained. _____

Applicant _____ Date _____

(signature)

Application Fee - \$100

Abutter Fee - \$6.00/abutter

\$13.00 Recording Fee