

Z.B.A. Meeting\_\_\_\_\_

Rec'd. \_\_\_\_\_

Fee \_\_\_\_\_

APPLICATION FOR HARDSHIP VARIANCE  
TO THE ZONING BOARD OF APPEALS

NAME OF APPELLANT\_\_\_\_\_

MAILING ADDRESS\_\_\_\_\_

CITY OR TOWN\_\_\_\_\_ STATE\_\_\_\_\_ ZIP CODE\_\_\_\_\_

TELEPHONE\_\_\_\_\_

NAME OF OWNER\_\_\_\_\_

ADDRESS OF PROPERTY (PROJECT)\_\_\_\_\_

TAX ASSESSOR'S MAP NO.\_\_\_\_\_ LOT NO.\_\_\_\_\_ ZONE\_\_\_\_\_

The undersigned requests that the Board of Appeals consider the following:

VARIANCE:

**Nature of Variance:** Describe the requested variance.

In addition, a scaled plan of the property must accompany this application showing dimensions and shape of lot, the size and locations of existing buildings, the locations and dimensions of proposed buildings and alterations, and any natural or topographic peculiarities of the lot in question. Please include a sketch showing distance from property lines to existing and proposed structures.

**Justification of Variance:** In order for a variance to be granted, the appellant must demonstrate to the Board of Appeals that the strict application of the terms of the zoning ordinance would cause undue hardship. The Board of Appeals must determine that your application meets the requirements for the variance that you seek. Please explain how your situation meets each of these criteria listed below:

Undue Hardship Variance.

- A. The land in question cannot yield a reasonable return unless a variance is granted.
- B. The need for a variance is due to the unique circumstances of the property and not to the general conditions in the neighborhood.
- C. The granting of a variance will not alter the essential character of the locality.
- D. The hardship is not the result of action taken by the applicant or a prior owner.
- E. No other alternative to a variance is available to the applicant.

F. The granting of the variance will not unreasonably adversely affect the natural environment.

G. The property is not located in a Resource Protection Zone.

PLEASE INCLUDE A SKETCH WITH DETAILED DIMENSIONS.

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION AND ITS SUPPLEMENTS IS TRUE AND CORRECT.

DATE

APPELLANT