| APPLICATION RECEIVED DATE: | CASE NO |
|-----------------------------|---------|
| NAME OF APPLICANT: | |
| MAILING ADDRESS: | |
| TELEPHONE NUMBER: | |
| PROPERTY OWNER: | |
| LOCATION OF PROPERTY: | |
| TAX MAP NUMBER: LOT NUMBER: | |

Complete the following sections with as much information as possible. Please use ink or complete electronically. Initial and date each page; sign and date the application in the spaces provided. This application will not be considered unless all required statements have been made.

THE ZONING BOARD WILL NOT ACCEPT INCOMPLETE OR LATE APPLICATIONS

Additional information may be supplied on separate sheets if the space provided is inadequate. Applications shall be acceptable only when presented to the Clerk of the Board at the beginning of any regularly scheduled meeting. ONE ORIGINAL AND SIX (6) COPIES OF THE COMPLETED APPLICATION SHALL BE PRESENTED TO THE CLERK. If you have any questions and/or require assistance, attend a regularly scheduled Zoning Board of Adjustment meeting for consultation.

Applicant is fully responsible for researching and knowing all laws which may be applicable and affect the outcome of the Board's decision on the application request. The applicant, or an authorized agent or attorney, must appear at the Public Hearing for the Board to take action on the application. The application will be terminated or tabled for failure to appear at a scheduled meeting. If an agent or attorney is designated to represent this application, the applicant must submit a signed Letter of Authorization.

Pay close attention when making the Abutter's List. An abutter is any person whose property is located in New Hampshire and adjoins or is directly across the street or stream from the land under consideration. YOU ARE **RESPONSIBLE FOR OBTAINING THE CORRECT OWNER AND MAILING INFORMATION FOR THIS LIST FROM THE TOWN TAX OFFICE.** This information is necessary to properly notify all interested parties with certified notices. Failure to provide complete or correct information on abutters will result in the application being returned and may delay the scheduling of your hearing.

Attach a copy of any Administrative Decision, if applicable; for example a denied Building Permit.

Applicant Initial/Date _____

APPLICATION FOR A SPECIAL EXCEPTION ZONING BOARD OF ADJUSTMENT | BRADFORD, NH 03221 APPLICATION FEES

All fees shall be paid before a public hearing can be noticed.

ADMINISTRATIVE & NEWSPAPER NOTICE Check made out to <u>Town of Bradford/ZBA</u>:

\$80.00

REQUIRED NOTICES (include Applicant, Abutters, Engineers, Easement Holders, etc.) Check made out to <u>Postmaster, Bradford, NH:</u> _____AT \$____EACH SUBTOTAL: \$_____

TOTAL FEES: \$_____

ZBA USE ONLY

Comments have been solicited from the Selectmen ___, Conservation Commission ___, Road Agent __, Police Chief __, Fire Chief __, and Planning Board ___ as appropriate.

DATE: _____

Certification:

I, Applicant, hereby certify that;

_____ I have read and understand the instructions for completing the application for a Special Exception.

_____ I have completed this application as completely and fully as possible.

_____ I have attached all evidence including sketches that I intend to discuss at the Public Hearing on this application.

_____ I understand that if this application is incomplete, it will be returned within a reasonable time following its submission and that this may delay the scheduling of the Public Hearing.

_____ I understand that I must appear in person at the Public Hearing to present and discuss this application. If I cannot appear in person, I will notify the Chair of the ZBA, in writing, designating the

individual who will appear for me.

_____ The ZBA has permission to enter this property in order to conduct scheduled site walks upon reasonable prior notice.

_____ My application for a Special Exception and supporting information is honest and truthful to the best of my knowledge.

| Applicant(s) signature: | Date: | |
|-------------------------|-------|--|
| Applicant(s) signature: | Date: | |

Why does your proposal require an appeal to the Zoning Board of Adjustment? Please check off the items that apply to your application:

Article III: General Provisions

- B. Mining or Excavation
 - □ 2. Alteration or enlargement
- D. Minimum Setbacks and Height Regulations
 - \Box 2. Front yard setback
 - \Box 6. Tool/storage shed
- G. Junk Yards and Motor Vehicle Junk Yards (Residential Rural District Only)
- □ N. Kennel Facilities (subject to conditions); See Article XII A3

Article IV: Establishment of Districts and District Provisions

- B. Description of Districts
 - 3. b. Residential Rural District
 - □ Accessory dwelling unit
 - 4. Commercial or industrial establishment in rural or residential district

Article V: Non-Conforming Building and Non-Conforming Use

- B. Non-conforming Building
 - □ 2. To enlarge or reduce the setback requirements (subject to conditions); See Article V B2
- C. Non-conforming Use or Activity
 - □ 1. Changed to another non-conforming use
 - \Box 2. Increase in the extent of a non-conforming use of a building or use of land

Article VI: Sign Regulation

- C: General Provisions
 - 9. Off Premise Sign, (subject to conditions); See Article VI-C9

Article X: Wireless Telecommunication Facilities

- D. Siting Standards
 - 2. Districts Permitted
 - □ Permitted by Special Exception (subject to conditions); See Article X

On a separate attachment outline:

What is proposed? Attach sketches, plot plans, pictures, construction plans, or other relevant documentation that explain the proposed use. Include copies of any prior applications concerning the property.

Describe the property. Give area, frontage, side and rear lines, slopes, natural features, etc. Attach survey plan, plot plan, etc.

Applicant Initial/Date _____

In accordance with Article XII A. 2, please answer the following questions (where applicable):

How is the site appropriate for the proposed use or structure?

How is the proposal not detrimental or injurious to the neighborhood?

How does your proposal address potential undue nuisance or hazard to pedestrians or vehicular traffic?

What provisions have been made for sanitary facilities?

What facilities will be provided for parking and utilities to ensure the proper use of the structure?

How is this proposal consistent with the spirit of the Zoning Ordinance and the intent of the Master Plan?

Applicant Initial/Date _____

SAMPLE ABUTER LIST

| APPLICANT NAME: | | | |
|--|--------------|-----------------|--|
| DATE: | Case Number: | Map/Lot No. | |
| ABUTTERS LIST | | | |
| FULL NAME AND ADDRESS FROM CURRENT TAX BLOTTER | | | |
| TAX MAP/LOT NO. | NAME | MAILING ADDRESS | |
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Complete Abutter List submitted with this Application Applicant Initial/Date _____