APPLICATION FOR A REHEARING ZONING BOARD OF ADJUSTMENT | Bradford, NH 03221

DATE FILED:	CASE NO
NAME OF APPLICANT:	
MAILING ADDRESS:	_
	_
TELEPHONE NUMBER:	
PROPERTY OWNER:	
(If same as applicant, enter "same")	
LOCATION OF PROPERTY:	
TAX MAP NUMBER: LOT NUMBER:	

This form must be completed and received by the Board within thirty (30) days after the date of the decision for which this rehearing is being requested. Within thirty (30) days following the date this application is received, the board will either grant or deny this application or suspend the decision complained of, pending further consideration. Should the motion for rehearing be approved, all fees below must be paid before a public hearing can be noticed.

I/We hereby request the Board to grant a rehearing on the decision of the application for appeal of the above case, numbered ______.

I/We believe a rehearing is necessary because the following (new) evidence demonstrates that the decision is wrong, unlawful, or unreasonable:

APPLICANT SIGNATURE:	DATE:
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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.

Bradford, NH Zoning Board of Adjustment