TOWN OF EMBDEN APPLICATION FOR VARIANCE OR APPEAL

TO: BOARD OF ZONING APPEALS

A. General Information Name of Applicant: Mailing Address: City/Town: State/Zip: Telephone: Name or Property Owner: (If Different from Applicant): Location of Property for which variance is requested (street/road address): Tax Map and lot number of subject property: Map Lot B. The undersigned requests (check either 1 or 2, but not both): 1) Review of alleged erroneous decision of Code Enforcement Officer of Planning Board in regard to Application for a Permit, denied on , 20 , it is the applicant's contention that the following error was made in the determination of the Code Enforcement Officer of Planning Board: 2) A variance: Nature of Variance: Describe generally the nature of the variance:

- 3. That the granting of a variance will not alter the essential character of the locality; and
- 4. That the hardship is not the result of action taken by the applicant or a prior owner.

C. Addition Information

In addition to the information provided above, please submit a sketch plan of the property showing dimension and shape of the lot, the size and locations of existing buildings, the locations and dimensions of proposed buildings, additions and alterations, the locations of roads and driveways,

the location of any water body adjacent to the property, and any natural and topographic peculiarities of the lot in questions.

C. Signature of Applicant

To the best of my knowledge, all information submitted on and with this application is true and correct. Signature of Applicant Printed Name of Applicant (For official use only – maintain as a permanent record) \$ Date Received: Fee Paid: Date of Public Hearing Date of Notice in Newspaper Mailed Notices to: Decision of Board of Appeals: Approved _____ Denied ____ If Application denied, reason for denial: If Approved, the following conditions and safeguards were prescribed: Signed by members of the Board of Appeals