

APPLICATION FOR APPEALS HEARING

BOARD OF APPEALS
TOWN OF EDGECOMB

APPLICANT'S NAME _____ TEL. # _____

ADDRESS _____ ZIP _____

OWNER'S NAME (if different) _____ TEL # _____

ADDRESS _____ ZIP _____

LOCATION OF PROPERTY: EDGECOMB TAX MAP # _____ LOT # _____

ROAD NAME _____ SUBDIVISION NAME _____

The undersigned requests that the Board of Appeals consider:

An Administrative Appeal. *Relief from the decision, or lack of decision, of the Code Enforcement Officer in regard to an application for a permit. The undersigned believes that (check one):*

_____ An error was made in the denial of the permit;

_____ The denial of the permit was based on a misinterpretation of the Ordinance;

_____ There has been a failure to approve, or deny, the permit within a reasonable period of time; and/or

_____ Other _____

A Variance. *Relief from a minimum zoning standard.*

_____ A side or rear property line setback;

_____ A setback from the right of way centerline;

_____ A setback from mean high water;

_____ Minimum lot size; and or

_____ Other _____

JUSTIFICATION OF VARIANCE

In order for a variance to be granted, the applicant must demonstrate to the Board of Appeals that the strict application of the terms of the Zoning Ordinance could cause undue hardship. There are four criteria which must be met before the Board of Appeals can find that a hardship exists. Please explain how your situation meets each of the following criteria:

1. The land in question cannot yield a reasonable economic return unless the variance is granted;
AND

2. The need for a variance is due to the unique circumstances of the property (such as physical restrictions) that are not present on other properties in the neighborhood; AND

3. The granting of a variance will not alter the essential character of the locality (e.g., a new residence in a neighborhood of residential homes); AND

4. The hardship is not the result of an action taken by the applicant or the prior owner. The action causing the hardship was, therefore, initiated prior to the passage of the Zoning Ordinance standard in question.

I hereby certify that the information contained in this application and its supplements is true and correct.

Signature of Applicant

Date

Note to applicant: Return this form to the Chairman of the Board of Appeals. In addition, a list of abutters and their mailing addresses, original permit decision and/or correspondence leading to this appeal, a copy of the deed for the land requesting a variance and a fee as set in the Land Use Ordinance Fee Schedule shall accompany this form, or it will not be accepted. You will be notified of the time and date of the hearing on your appeal.
