

APPLICATION TO THE BOARD OF ADJUSTMENT

To: THE BOARD OF ADJUSTMENT, MONT VERNON, NEW HAMPSHIRE

This form will be used for Hearing and Rehearing. For Hearing, fill out completely. For Rehearing, fill out Items 1, 2, 3, 10, and 11, and any others to which changes, or additions are pertinent since the original hearing. Use continuation sheets, if necessary.

1. This is an application for (1st Hearing) / (Rehearing of Case # _____)
Cross out one of the preceding.

2. Applicant: Name: _____ Address: _____
Telephone # _____

3. Property which is the subject of this application:
Owner: _____
Location (Street) _____
Tax Map and Lot _____
Description (boundary dimension, total area, present use, etc...) _____

*** FILL OUT ITEM 4, 5, OR 6 BELOW, DO NOT FILL OUT MORE THAN ONE ITEM ***

4. APPEAL FROM AN ADMINISTRATIVE DECISION: The undersigned alleges that an error has been made in the decision, determination, or requirement by the Administrative Official on (date) _____, to (person requesting permit) _____
In relation to Article _____ Paragraph _____ of the Mont Vernon Zoning Ordinance and hereby appeals said decision.

5. APPLICATION FOR SPECIAL EXCEPTION: The undersigned hereby requests a Special Exception as provided for in Article _____ Paragraph _____.
Application wishes to: _____

6. APPLICATION FOR VARIANCE: The undersigned hereby requests a Variance to the terms of Article _____ Paragraph _____ and asks that said terms be waived to permit: _____

The undersigned alleges that the following circumstances exist which prevent the proper enjoyment of this land under the strict terms of the Zoning Ordinance and thus constitutes an unnecessary hardship as follows:

- 7. ABUTTERS: See attached sheet.
- 8. ATTACHMENTS: Any documentation involved in this Application such as:
 - (a) Map or sketch of property or buildings involved Drawn to Scale.
IF ADEQUATE DATA IS NOT SUPPLIED, THE CLERK OF THE BOARD OF ADJUSTMENT MAY REJECT YOUR APPLICATION OR THE BOARD MAY DENY YOUR APPLICATION AT THE HEARING REQUIRING YOU TO REFILE AND PAY A SECOND APPLICATION FEE.
 - (b) Application for “Permit to Build, Alter or Enlarge Building” which is involved in this Application for Appeal.
 - (c) Additional explanations, justifications, abutters’ statements, etc.
 - (d) Fire ward’s approval (if applicable).
 - (e) Board of Health approval (if applicable).
- 9. REFERENCES AND CRITERIA IMPORTANT TO THIS APPLICATION ARE:
 - (a) Handbook “Board of Adjustment in New Hampshire” (available at Town Office).
 - (b) Mont Vernon Zoning Ordinances (available at Town Office or on Town Web Site).
 - (c) Applicant or his representative MUST be present at hearing. Failure to appear will result in the forfeiture of the fee paid for that meeting.

I, THE UNDERSIGNED, AM FAMILIAR WITH THE ORDINANCES PERTINENT IN THE CASE AS STATED ABOVE.

10. SIGNATURE: _____ DATE: _____

APPLICANT – DO NOT WRITE IN THIS SPACE

All Appropriate Fees: \$ _____

Case # _____

Date Received: _____

Signature of ZBA Clerk: _____

PROCEDURE FOR APPLICATION FOR AN APPEAL

Note: The ZBA meets on the 3rd Tuesday of the month, as needed.

The following requirements must be met in order for the ZBA to hear your appeal:

A. Application

1. Your completed application must be received by the clerk 3 weeks prior to the hearing date for which you are applying.
2. Notifications: A check for certified mailing fees (current Postal Rates) for each abutter, and the applicant made payable to the Postmaster.
3. An application fee of \$ 50.00, payable to the Town of Mont Vernon.
4. For projects requiring filing with the Registry of Deeds a filing fee of \$25.00 is required as well as an LCHIP fee of \$26 made payable to the Hillsborough County Registry of Deeds.
5. A copy of the Assessing Card relevant to this property.

ALL OF THE ABOVE MUST BE RECEIVED 21 DAYS PRIOR TO THE REQUESTED HEARING DATE

ATTACHMENTS

1. 2 Page application
2. Instructions for appeal
3. Abutters List

**Procedure to be followed in appeals to the
ZONING BOARD OF ADJUSTMENT
Town of Mont Vernon**

Application for appeal is to be filed with the Clerk of the ZBA. Hearings are held on a date set by the Clerk, subject to meeting legal notice requirements.

With the application, the following must be supplied by the applicant:

1. Application fee of \$50.00.
2. For projects requiring filing with the Registry of Deeds a filing fee of \$25.00 is required as well as an LCHIP fee of \$26 made payable to the Hillsborough County Registry of Deeds.
3. Names and legal address, including zip code, of all abutters of lot in question, plus a check made payable to the Postmaster for all certified mailing fees at the current postal rate.
4. Plot plan showing lot location referenced to nearest street intersection, lot size, lot line setbacks, ownership of adjoining land, drawn to approximate scale as shown in attached sample.
5. A written description of work proposed or change in use, with any dimensions or description of materials related to construction.

Notification: After acceptance of application, notice will be mailed advising time, place and date of public hearing.

Hearing: At the time of hearing, applicant or a designated representative should appear before the Board to explain the application.

Decision: In most cases, a decision on the application is made in public and is available at the end of the session. Applicants are also notified of ZBA decisions by mail and same are recorded at the Mont Vernon Town Hall.

Appeal: In the case of an adverse decision, applicants may apply for a rehearing within twenty (20) days by following the same procedure as outlined above. If, in the opinion of the Board, sufficient cause is shown, a rehearing may be granted.

Rehearing: After rehearing or decision to refuse same, the applicant may, within thirty (30) days, appeal to Superior Court.

**ZONING BOARD OF ADJUSTMENT
MONT VERNON, NH**

ABUTTERS LIST

Definition of an Abutter for this application: any person whose property is within 200' of any border of the applicant's property.

For the purposes of receiving testimony only, and not for purposes of notification: the term abutter shall include any person who is able to demonstrate that his/her land will be directly affected by the proposal under consideration.

| | Tax Map # | Lot # | Name | Mailing | Zip |
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I hereby certify that the above list contains the names and Mailing Addresses of all the current owners.

SIGNATURE _____ DATE: _____