

**Town of Enfield Zoning Board of Adjustment  
Application for Appeal**

Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

Owner \_\_\_\_\_

Location of Property \_\_\_\_\_  
(if same as applicant, write "same")

\_\_\_\_\_ (street, number, tax map & lot number)

NOTE: Fill in Section 1, 2, 3 or 4 as appropriate. This application is not acceptable unless all required statements have been made. Additional information may be supplied on a separate sheet if the space provided is inadequate.

**BE SURE TO SIGN AND DATE THE APPLICATION.**

**Section 1. APPEAL FROM THE ADMINISTRATIVE DECISION**

Relating to the interpretation and enforcement of the provisions of the zoning ordinance.

Decision of the enforcement officer to be reviewed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number \_\_\_\_\_ Date \_\_\_\_\_  
Article \_\_\_\_\_ Section \_\_\_\_\_ of the zoning ordinance in question:

**Section 2. APPLICATION FOR A SPECIAL EXCEPTION**

Description of proposed use showing justification for a special exception as specified in the zoning ordinance  
article \_\_\_\_\_ section \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 3. APPLICATION FOR VARIANCE**

A variance is requested from article \_\_\_\_\_ section \_\_\_\_\_ of the zoning ordinance to  
permit \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Facts supporting this request:**

1. The proposed use would not diminish surrounding property values because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Granting the variance would be of benefit to the public interest because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Denial of the variance would result in unnecessary hardship to the owner because of the following special  
circumstances of the property that distinguish it from other properties similarly zoned:

\_\_\_\_\_

4. Granting the variance would do substantial justice because:

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5. The use is not contrary to the spirit of the ordinance because:

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**Section 4. APPLICATION FOR EQUITABLE WAIVER OF DIMENSIONAL REQUIREMENTS**

An Equitable Waiver of Dimensional Requirements is requested from article \_\_\_\_\_ section \_\_\_\_\_ of the zoning ordinance to permit \_\_\_\_\_

1. Does the request involve a dimensional requirement, not a use restriction?

yes  no

2. Explain how the violation has existed for 10 years or more with no enforcement action, including written notice, being commenced by the town:

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**- OR -**

Explain how the nonconformity was discovered after the structure was substantially completed:

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or after a vacant lot in violation had been transferred to a bona fide purchaser:

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and how the violation was not an outcome of ignorance of the law or bad faith but resulted from a legitimate mistake:

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3. Explain how the nonconformity does not constitute a nuisance nor diminish the value or interfere with future uses of other property in the area:

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4. Explain how the cost of correction far outweighs any public benefit to be gained:

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Applicant	_____
(Signature)	_____
Date	_____

**For office use:**

Case #:	_____	Date filed:	_____
_____ (Signed: Planning/Zoning Administrator)			

Enfield Zoning Board of Adjustment  
Enfield, NH

**LIST OF ABUTTERS**

**Applicant's name and address:**

**Name and address of agent:**

_____	_____
_____	_____
_____	_____

<b>Map</b>	<b>Lot</b>	<b>Name &amp; address of property owner</b>	<b>Notice sent</b>	<b>Notice ret.</b>
_____	_____	_____	_____	_____
		_____		
		_____		
_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____
		_____		
		_____		

Enfield Zoning Board of Adjustment  
Enfield, NH

**LIST OF ABUTTERS**

<b>Map</b>	<b>Lot</b>	<b>Name &amp; address of property owner</b>	<b>Notice sent</b>	<b>Notice ret.</b>
_____	_____	_____	_____	_____
		_____		
		_____		
_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____
		_____		
		_____		

# Town of Enfield, New Hampshire

## Zoning Board of Adjustment

P.O. Box 373, Main Street

Enfield, NH 03748

Tel. 603-632-4067 \* FAX 603-632-5182

TDD 603-632-4201

### **FEE SCHEDULE**

Hearing Fee	\$ 50.00
Mailing	\$ 5.00 per party (abutters, applicant and licensed professional)
Advertising	\$ 35.00
Sign Permits	\$ 5.00
Copies of Zoning Ordinance	\$ 10.00

## ZBA Application Checklist

- 1) Cover sheet filled out completely and one of the four hearing types.
- 2) Abutters list with complete addresses. If there are more than five mailings applicant must furnish three sets of mailing labels
- 3) Cover letter declaring intent and addressing reasons supporting the request.
- 4) Check payable to the Town of Enfield to cover the hearing fees.
- 5) Six copies of the site sketch. Sketch should include the name of the owner, location of the property, North bar and enough detail to show the nature of the request. Engineered plans are not required but requests will be held up if site sketches are unclear.
- 6) Page two of the Application for Appeal must have the property owner's signature. Faxed signatures will be accepted. Agent signatures will not.