

Fee= \$65.00
Recording= 10.00
\$75.00

TOWN OF MIDDLESEX
Zoning Board of Adjustment
Application

Application # _____ Date ____/____/____

Landowner: _____ Appellant: _____

Address: _____ Address: _____

Phone () _____ Phone () _____

Property Location: _____

Tax Map # _____ Lot # _____ Zone: _____

Type of Application (check one)

- () Appeal from decision of Administrative Officer (a copy of this appeal must be filed with the Administrative Officer).
- () Application for Conditional Use Permit.
- () Application for a Variance (Including enlargement or extension of non conforming use) (must meet the conditions of 24 VSA Sec.4468 before approval can be granted).
- () Other: _____

Provisions of Zoning Ordinance in question: _____

Reason for Appeal: _____

The owner or applicant should submit with this application: plans, elevations, diagrams, maps and any additional information and data to advise the Board fully with reference to the application or appeal.

Signature of Applicant

.....
FOR USE BY TOWN STAFF

Notice of Hearing Published: ____/____/____

Date of Hearing: ____/____/____

Date of ZBA decision: ____/____/____

_____ The Zoning Board of Adjustment has approved your request as indicated above. If applicable, the following conditions were applied to the approval. _____

_____ The Zoning Board of Adjustment has denied your request as indicated above. The following was the determination of the Board. _____

ATTEST: _____
(secretary of the Board of Adjustment)

DATE: _____