

TOWN OF CAMPTON
ZONING BOARD OF ADJUSTMENT
12 GEARTY WAY
CAMPTON, NH -03223

603-726-3223

The following material is necessary in order for a completed application to be submitted to the Campton Zoning Board of Adjustment

- 1 The application may be mailed to the Campton Town Office, c/o Zoning Board of Adjustment or dropped off at the Campton Town Office.
The Zoning Board of Adjustment meets on demand and generally meet on Thursday evenings.

Your hearing will be scheduled within three weeks of the submittal of your application-The notice must be posted in the local newspaper for a two week period.

You will be notified by certified mail along with your abutters of your hearing date.

YOU OR AN AUTHORIZED REPRESENTATIVE MUST ATTEND THE MEETING. YOUR REPRESENTATIVE MUST HAVE A LETTER OF AUTHORIZATION FROM YOU.

The attached application must be completed.

3. A *separate* list of all abutters; along with their names, addresses and tax map # s. You must have your abutter list verified with the Zoning Board Clerk but it is your responsibility to submit a complete list of all abutters.
4. A detailed letter of intent to be submitted with your application. This letter is mailed to your abutters by the Zoning Board Clerk.

Maps and/or Sketches are required if applicable.

ZONING BOARD OF ADJUSTMENT FEES:

\$85.00 Application Fee (includes an update copy of the Zoning Ordinance.)

\$6.56- Per abutter, including applicant (this fee *covers* the cost of the certified mailing)

The Zoning Board of Adjustment reserves the right to reject incomplete applications. (Please be sure to follow all directions and submit all information required. Feel free to call the Zoning Board Clerk with any questions.)

Town of Campton
New Hampshire 03223

TO: BOARD OF ADJUSTMENT

Do not write in this space

Case No. _____

Date filed _____

(signed)

Filing fee rec'd _____

Names of applicant _____

Address _____

Owner _____

(if same as applicant, write "same")

Location of property

(street, number, subdivision, or lot number)

NOTE: Fill in the following sections 1, 2, or 3 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.

Section 1. APPEAL FROM AN ADMINISTRATIVE DECISION

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

The decision of the enforcement officer to be reviewed is

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 A 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:

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

Applicant's signature: _____

Date: _____