

# Town of Gill

## Application to Modify a Special Permit

***The undersigned herewith submits an application and requests a hearing before the Zoning Board of Appeals to modify a Special Permit.***

*Please type or print all information and return it to the Town Clerk with the \$250 filing fee (cash, check or money order payable to the Town of Gill).*

1. Name of Applicant: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Applicant Status: Owner \_\_\_\_ Contract Purchaser \_\_\_\_ Lessee \_\_\_\_  
Other (please explain) \_\_\_\_

2. Property Owner: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

<p><b>3. Parcel ID: Street Address</b> _____ <b>Map</b> _____ <b>Lot #</b> _____ <i>(This information is on your tax bill or you can call the tax collector.)</i></p>
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4. Date of vote/approved of Special Permit to be modified: \_\_\_\_\_

5. Purpose or nature of the requested modification: (Use additional sheets, if necessary.)

6. Lot Size: \_\_\_\_\_ Frontage: \_\_\_\_\_ Front Setback: \_\_\_\_\_

Left Side Setback: \_\_\_\_\_ Right Side Setback: \_\_\_\_\_ Rear Setback: \_\_\_\_\_

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

Received by Town Clerk:

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Town Clerk's Signature: \_\_\_\_\_