

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.

The original and six complete copies of this form and any attachments to the Appeal Application must be filed with the Town Clerk. You will be notified of the time and date of a public hearing to be scheduled within 65 days of receipt.

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: _____

3. Parcel ID: Street Address _____ Map _____ Lot # _____ <i>(This information is on your tax bill or you can call the tax collector.)</i>

4. Date of vote/approval 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: _____