

For Official Use	
Receipt Stamp	
<b>Docket Number</b>	
<b>Application Fee</b>	\$
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**APPLICATION FOR ZONING RELIEF**

*For Applicant's Use*

<b>Type of Zoning Relief Sought by Applicant</b>	
	Variance
	Special Permit
	Special Permit under Section 5 of the Zoning Bylaw
	Comprehensive Permit (pursuant to G.L. c. 40B)
<b>Appeal of Decision (pursuant to G.L. c. 40A)</b>	
	Building Inspector
	Planning Board
	Other

Please see Groveland Zoning Board of Appeals Rules and Regulations for specific requirements for plans and other materials required to be submitted in support of this application.

**PLEASE PRINT OR TYPE**

<b>1. SUBJECT PROPERTY INFORMATION</b>			
<b>Address</b> (Number & Street Name)			
<b>Zoning District</b>	<b>Assessor's Map &amp; Lot</b>		
	<b>Map Number</b>	<b>Lot Number</b>	
<b>Current Use</b>			

<b>2. APPLICANT INFORMATION</b>				
<b>Name of Applicant (s)</b>				
<b>Address</b>				
<b>City, State, Zip</b>				
<b>Phone Number</b>				
<b>Email Address</b>				
<b>Is Applicant the Owner of the Property?</b>	<b>YES</b>		<b>NO</b>	

**REPRESENTATIVE:**

<b>Name of Representative: (If Not Applicant)</b>	
<b>Address</b>	
<b>City, State, Zip</b>	
<b>Phone Number</b>	

**LEGAL OWNER:**

<b>Name of Legal Owner (If Not Applicant)</b>	
<b>Address</b>	
<b>City, State, Zip</b>	
<b>Phone Number</b>	

**3. LOT AND BUILDING DIMENSIONS**

<b><u>PROPERTY</u></b>	<b>Primary (At Address Location)</b>	<b>Secondary (If on more than one street or way)</b>
<b>Required Frontage (feet)</b>		
<b>Existing Frontage (feet and inches)</b>		
<b>Proposed Frontage (feet and inches)</b>		

<b>SETBACK</b>	<b>FRONT</b>	<b>SIDE</b>		<b>REAR</b>
		Left	Right	
<b>Required Setbacks (feet)</b>				
<b>Existing Setbacks (feet and inches)</b>				
<b>Proposed Setbacks (feet and inches)</b>				
<b>LOT</b>	<b>AREA (square feet)</b>	<b>COVERAGE (square feet)</b>	<b>MAXIMUM COVERAGE (%)</b>	
<b>Required</b>				
<b>Existing</b>				
<b>Proposed</b>				
<b>DWELLING OR STRUCTURE</b>	<b>HEIGHT</b>	<b>NUMBER OF STORIES</b>		
<b>Required</b>				
<b>Existing</b>				
<b>Proposed</b>				

<b>4. DOES THE LEGAL OWNER OWN THE ADJACENT LAND?</b>		<b>YES</b>		<b>NO</b>	
If Yes, Provide Address and Tax Map & Lot of Adjacent Property.					
Address					
Tax Map Number		Lot Number			

**5. If Existing Property, Structure(s), and/or uses DO NOT conform to the current Zoning Bylaw, please describe what characteristic is non-conforming and when the lot, structure, or use began. (Attach extra sheet if necessary)**

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**6. Describe what is being proposed, planned or appealed. (Attached extra sheet if necessary)**

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**7. Structures on Property**

		Existing	Proposed
	Number of Buildings (Primary Residence, Accessory, including sheds)		
	Number of Dwelling Units (including Primary Residence)		

## 8. Application Submission Checklist

One Original and Eight (8) Copies of Signed Application Form

Filing Fee

Eight (8) Copies of Site Plans prepared in accordance with the Groveland Zoning Board of Appeals Rules and Regulations, including

- ❖ The dimensions and location of the subject property;
- ❖ The location, dimensions, setbacks, and height of existing and proposed structures on the subject property;
- ❖ Elevations of proposed structures.

Assessor's Property Card for Subject Property

Abutters List obtained from Groveland Assessor

The information provided in this application is true and correct to the best of the Applicant's knowledge.

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Applicant's Signature

\_\_\_\_\_  
Date