



TOWN OF GRANBY

BOARD OF APPEALS

Kellogg Hall
250 State Street
Granby, MA 01033

GUIDELINE TO FILE FOR APPLICATION FOR HEARING FOR ZONING BOARD OF APPEALS

Submission must have:

1. Written denial from Building Inspector/Zoning Officer
2. One (1) "Application for Hearing" completely filled out.
3. Complete Surveyed Site Plan showing pin location, building location and proposed additions. A topography map (if available)
4. Complete permit plans including elevations
5. A certified list of abutters prepared by assessor's office.
(Prepared within three (3) months of the "effective date of submission").
6. Filing Fee - \$125.00

The Applicant must then bring the "Application for Hearing", along with the fees, plans and documents 250 State Street and give them to the Cathy Leonard who will then have a ZBA member make sure the submission is complete. Which then constitutes the "effective date of submission" and at which time the review process will begin.

THIS GUIDELINE TO BE GIVEN TO APPLICANT



TOWN OF GRANBY

BOARD OF APPEALS

Kellogg Hall
250 State Street
Granby, MA 01033

Application for Hearing

Date: _____

Name of applicant or appellant: _____

Address: _____

Location of property: _____

Applicant is _____, (owner, tenant, licensee, prospective purchaser—give name and address of owner if applicant/appellant is not owner)

Nature of application or appeal: _____

Applicable section of Building, Zoning By-Law: _____

Date of denial by Building Inspector/Zoning Officer _____

I hereby request a hearing before the Board of Appeals with reference to the above noted application or appeal. I have received a copy of the Rules and Regulations of the Board of Appeals and I understand that I must bring the information described in Article II, Section 5 of those rules and regulations to the public hearing. I also understand that my failure to supply this information will result in the postponement of the hearing until I make the information available to the Board.

(Signature of Applicant/Appellant)

(Signature of owner if different)

Received from about applicant, the sum of \$125.00. YES _____ NO _____

PLOT PLAN

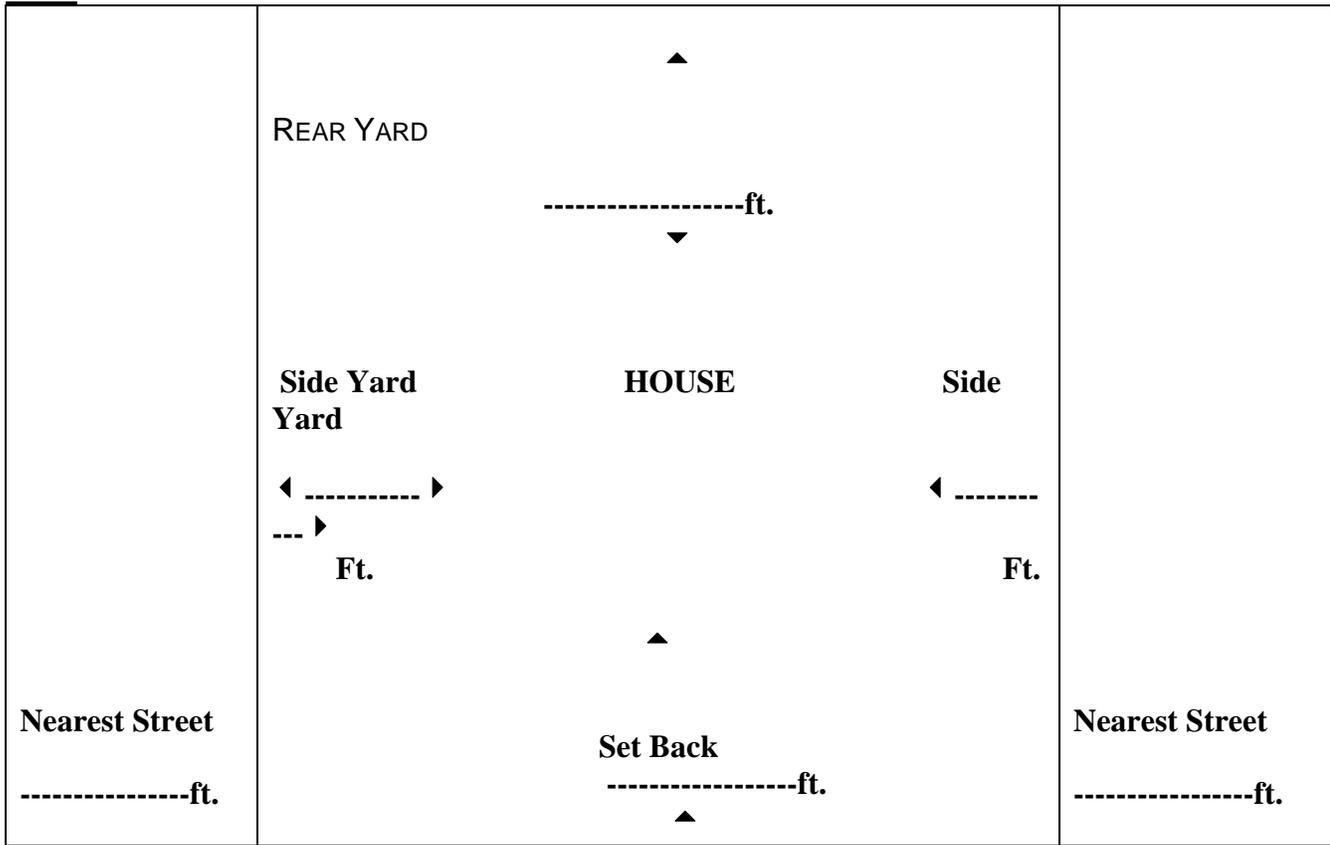
DATE: _____

HOUSE NUMBER _____

LOT NUMBER _____

OWNER OF LAND _____

ZONE _____



_____ **Street/Avenue/Road**

Mark North Point

Signature _____