



# BOARD OF ADJUSTMENT

4 North Lowell Road  
Windham, New Hampshire 03087  
Telephone (603) 432-3806

## COVER SHEET FOR WINDHAM ZONING BOARD OF ADJUSTMENT APPLICATION

Application attached (check one of the following):

- APPEAL FROM AN ADMINISTRATIVE DECISION RSA 674:41
- SPECIAL EXCEPTION
- AREA VARIANCE
- USE VARIANCE
- REHEARING
- EQUITABLE WAIVER
- APPEAL OF AN ADMINISTRATIVE DECISION

**For Office Use Only:**

**Case No.** \_\_\_\_\_

**Date Filed** \_\_\_\_\_

**Fee Paid** \_\_\_\_\_

**Secretary** \_\_\_\_\_

Name Of Applicant \_\_\_\_\_

Address \_\_\_\_\_

Owner \_\_\_\_\_

Location Of Property \_\_\_\_\_  
**(Street Number And Lot Number)**

I/We the undersigned, being the owner/owners of the real estate listed above, request a hearing with the Windham Zoning Board of Adjustment to permit the action described in the attached application. I/We also hereby authorize individual members of the Windham ZBA to enter on and inspect the property proposed for action by this application. Acceptance of this application and inclusion of the application on the Zoning Board's agenda does not infer that all zoning requirements have been satisfied. Neither the review of any plan by officials of the Town of Windham, nor any subsequent inspection of the premises, should be relied upon as an assurance of conformity to legal requirements. The applicant shall remain fully responsible for complying with all applicable state or local laws, ordinances, regulations or conditions. Agents and/or option holders, lessees must supply written authorization to petition on behalf of owner/owner.

Owner's Name \_\_\_\_\_ Applicant's Name \_\_\_\_\_

Owners Signature \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_ \_\_\_\_\_ Zip \_\_\_\_\_

Phone No. \_\_\_\_\_ Phone No. \_\_\_\_\_

Date \_\_\_\_\_ Date \_\_\_\_\_

**For Office Use Only:**

**Have two plans been submitted?** \_\_\_\_\_ **Application reviewed by** \_\_\_\_\_