TOWN OF MENDON ZONING BOARD OF APPEALS 20 MAIN ST. MENDON, MA 01756



# APPLICATION FOR (check one)

# In accordance with Mendon Zoning By-Laws

	SPECIAL PERMIT (M.G.L. Ch. 40, § 9)				
	VARIANCE (M.G.L. CH. 40, § 10)				
repres	oplication must be completed, signed, and submitted with the filing fee by the petitioner or their entative in accordance with the Board's rules and regulations which can be found at mendonma.gov or in the Town Clerk's office.				
1.	1. PETITIONER: Includes Equitable Owner (purchaser on a purchase and sales agreement				
	Name:				
	Address:				
	Phone:Alt phone:				
	Email:				
	Petitioner is: (Check one) Tenant Agent Purchaser				
2. OWNER: (If other than petitioner)					
	Name:				
	Address:				
	Phone: Alt phone:				

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

	AUTHORIZATION:		
f someone other than the owner or equitable owner is the petitioner, the owner or equitable			
owner must design	nate such representative below.		
Name:			
Address:			
Phone:	Alt phone:		
Email			
Eman:			
Relationship of rep	presentative to owner or equitable owner:		
	·		
	rize, to represent my/our		
interests before th	e Board of Appeals with regards to this petition.		
Signature of Owns	r or Equitable Owner		
Signature of Owne	r or Equitable Owner		
	4. SUBJECT PROPERTY		
	4. SUBJECT PROPERTY		
Street Address:	4. SUBJECT PROPERTY		
Assessor's Map	Lot #		
Assessor's Map			
Assessor's Map Zoning District (Ch	Lot #		
Assessor's Map Zoning District (Ch	Lot # eck one) RR		
Assessor's Map Zoning District (Ch	Lot # eck one) RR		
Assessor's Map Zoning District (Ch Registry of Deeds	Lot # eck one) RR		

### 5. NATURE OF RELIEF REQUESTED

Article/Section of Mendon Zoning By-Laws						
Which allows/requires :						
The specific relief we/I request is as follows:						

#### 6. EVIDENCE TO SUPPORT GRANT OF VARIANCE

(ref. M.G.L. Ch. 40, § 10)

A. Describe/demonstrate unique/peculiar soil conditions, shape, or topography of subject property. Describe how these conditions especially affect only the land or structures in question, how they are unique to the subject property, and do not affect generally the zoning district in which it is located.

В.	. Describe how you believe a hardship is caused by the unique/peculiar attributes of the so		
	conditions, shape, or topography of this subject property under a literal enforcement of the		
	Zoning By-Laws? The hardship you describe must be related to the unique or peculiar		
	attributes you have described above.		
	I/we herby certify under the pains and penalty of perjury that the information contained in this application is true and complete and the Town of Mendon will be held harmless by the undersigned from any claims or judgements resulting from any misinformation given		
	herein.		
	I/we have read the Rules and Regulations of the Mendon Zoning Board of Appeals		
	Signature of Applicant	Date	
	Signature of Co-Applicant	Date	
	Signature of Owner (if other than applicant)	Date	
	Signature of Equitable Owner	Date	

### **Documents submitted**

Completed variance application
Owner authorizations complete
Electronic copy of entire submission (via email or thumb drive)
6 collated copies of the entire submission and site plan(including uplands and
abutters)
Certified abutters list from the Assessor's Office
4 sets of mailing labels
Copy of the Deed for the subject property
Copy of building permit application and/or any correspondence from the
building department
Copy of any previous decisions on Special Permits or Variances for the subject
property
Soil/geological studies, topographical maps, other support documentation

Petition, application, or appeal herein, including	g documents required listed under Rules			
and Regulations of the Mendon Zoning Board of Appeals, and filing fee of \$				
received this date.				
Town Clerk	Date			