

Town of Hooksett
Zoning Board of Adjustment
Equitable Waiver Application Requirements

In the interest of providing the Zoning Board of Adjustment the necessary information pertinent to the equitable waiver request by an applicant, the following information shall be provided in **twelve (12) collated sets** of the completed application form. Certified mailing envelopes shall be supplied by the applicant and filled out with the abutter information. Failure to do so will result in a delay in processing your application and you will be found incomplete.

Additional details:

1. Applicants are required to present their applications at the ZBA meeting and answer any questions the ZBA may have.

Per Hooksett Zoning Ordinance, Article 24:I, the Zoning Board of Adjustment may require investigative studies or analyses in relation to any matter brought before it for judgment, and reasonable fees, in addition to fees for notice, may be imposed by the Board to cover its administrative expenses and costs of such investigative studies, review of documents and/or other matters which may be required by particular applications brought before the Board.

Zoning Board of Adjustment
FEES

Application Fee

\$30.00 Residential
\$60.00 Commercial

Abutters

\$10.00 each plus cost of
Advertising Public Hearing
in the local newspaper, and
clerical fees.

ZONING BOARD OF ADJUSTMENT APPLICATION

CASE # _____ DATE FILED _____

Name of Applicant _____ Telephone _____
(Must be owner (s) of record)

Address _____

Representative _____ Telephone _____

(Please attach letter of authorization signed by the owner)

Location of Property _____
(street address)

Tax Map _____ Lot _____ Zone _____

Homeowners' / Condo Association: ___ Yes ___ No

Association Name and Address _____

NOTE: Fill in Section 1,2, or 3, as appropriate. This application is not acceptable unless all required statements have been made. Additional information may be supplied on a separate sheet if the space provided is inadequate.

Has this property ever received a variance or special exception in the past?
If so, please list date and type of approval. _____

SIGNATURE _____ DATE _____

SECTION 4. APPLICATION FOR AN EQUITABLE WAIVER UNDER RSA 674:33-a

Description of proposed use showing justification for an equitable waiver as specified in RSA:33-a.

Facts supporting this request:
