

Town of Franklin
Application to Zoning Board of Appeals

Appeal No. _____
Date _____
Approved _____ Chairperson Signature _____
Denied _____ Chairperson Signature _____

Please complete this application in ink and return it to Code Enforcement Officer for submittal to the ZBA Chairperson ten (10) days prior to the ZBA regularly scheduled meeting. Include with this application the sketch map or site plan that was submitted to the Code Enforcement Officer or Planning Board with your original application.

Applicant Information:

Applicant/Owner Name _____ Phone _____
Address _____

Type of Appeal requested:

- () An interpretation of the Zoning Law or Zoning Map.
- () A variance to the Zoning Law.

Appeal is hereby made with respect to the following premises:

Located in Zone _____ on the _____ side of _____
(District) (Direction) (Street)
Tax Map ID# _____
(Section) (Block) (Lots)

Provision(s) of the Zoning Law appealed:

Article _____ Section(s) _____ Pages _____

Describe necessity of the requested appeal: (use extra sheet if necessary)

The above statements are true to the best of the knowledge and belief of the undersigned:

Signed by _____ (Owner or Representative)
(Date)