

File # _____

Date: _____

Fee: _____

**APPLICATION FOR AN APPEAL
to the Zoning Board of Review or Board of Appeal
Town of New Shoreham**

Appeal of a Decision of the: _____ Zoning Official
_____ Building Official
_____ Planning Board
_____ Historic District Commission
_____ Other Appeal under Zoning Board's jurisdiction

1. Appellant: _____ Phone: _____

Address: _____ Email Address: _____

Mailing Address: _____

2. Owner of Subject Property: _____ Phone: _____

Address: _____ Email Address: _____

Mailing Address: _____

3. If the appellant is not the owner, state the relationship to, or the interest in, the subject property.

4. Description of Subject Property:

a. Street address _____

b. Assessor's Plat: _____ Lot: _____ Fire # _____

c. Zoning District: _____

5. Identify the specific decision appealed from, including the date of the decision.

6. Provide a copy of the order or decision which is being appealed

7. Explain the appellant's standing to bring the appeal.

8. Describe in detail the reasons for the appeal including a detailed explanation of the reason why the decision was in error (*include references to governing provisions of any ordinances*).

9. Include any plans, documents, reports or information supporting the appeal.

10. Radius map of all properties within two hundred (200) feet of all the property lines of the subject property.

11. List of names and addresses of all owners of property within 200' of the subject property.

12. Check or money order, payable to the Town of New Shoreham, as follows:

| | |
|--|----------|
| Appeal from a decision of the Building Official | \$300.00 |
| Appeal from a decision of the Historic District Commission | \$300.00 |
| Appeal from a decision of the Planning Board | \$300.00 |
| Mailing Costs – TBD | \$_____ |

13. Transcript fee agreement: In the event that I choose to appeal the decision of the Zoning Board of Review in this matter, I hereby agree to pay the cost of transcription of the record of the decision so appealed.

Respectfully submitted,

Appellant's Signature

Date