



## APPLICATION FOR APPEAL/VARIANCE

### Town of North Haven Board of Appeals

**Applicant:**

NAME: \_\_\_\_\_ MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ TEL: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

**Agent: (if applicable)**

NAME: \_\_\_\_\_ MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ TEL: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

RELATIONSHIP TO APPLIANT: \_\_\_\_\_  
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Please complete this application in its entirety. You may add other information as may be needed to adequately describe the purpose of seeking relief from the North Haven Board of Appeals (BOA). If you need assistance for any unanswered questions, please feel free to contact: the Town Office to be directed to the Chairperson of the Board of Appeals.

The following has been completed and attached, including section for relief.

- |   |  |
|---|--|
| <input type="checkbox"/> Statement of Problem | <input type="checkbox"/> Administrative Appeal |
| <input type="checkbox"/> Specific Request     | <input type="checkbox"/> Variance, LUO only    |
| <input type="checkbox"/> Standing             |  |
| <input type="checkbox"/> List of Abutters     |  |

APPLICANTS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

AGENT SIGNATURE (IF APPLICABLE) \_\_\_\_\_ DATE: \_\_\_\_\_

# APPLICATION FOR APPEAL

NAME OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

I wish to appeal to the North Haven Board of Appeals because I have a problem which is in regard to a matter of: **(please check only one)**

## LAND USE

- Land Use Ordinance
- Subdivision Ordinance

And further, **I understand** that:

- ✓ The role of the BOA is to examine and resolve problems between the Town of North Haven and those affected by its ordinances, decisions, or lack of action by the Town; and
- ✓ The only issues the BOA is legally authorized to deal with are those arising from the list above, and do not include such matters as constitutionality, civil rights, criminal acts, property disputes, surliness, etc.; and
- ✓ The BOA will not even hear my appeal unless I can show that I have “standing” to have my complaint heard; and
- ✓ The BOA will try to decide my case based only on the factual information presented and what is written in the pertinent Town ordinance/regulation, State statute(s)/regulation(s) and the rulings of the rulings of the State Supreme Judicial Court; and
- ✓ The BOA tries to make decisions it believes would be upheld if appealed to Superior Court; and
- ✓ The local appeals process must be exercised and exhausted before the Superior Court will hear these cases; and
- ✓ Compliance with BOA decisions is voluntary by all parties, compulsion requires a court order.

# APPLICATION FOR APPEAL

NAME OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

I understand that the purpose of establishing my case for **Standing** is to limit appeals on an issue to those who are directly involved and/or affected.

I have right, title or interest in the affected property, or issue, as shown by \_\_\_\_\_

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Unlike others in the community, I will suffer a particularized injury in this matter if not resolved in my favor. I am adversely and directly affected by: \_\_\_\_\_

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I have participated in the proceedings which led to this appeal as shown by the following documentation and/or witnesses: \_\_\_\_\_

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# APPLICATION FOR APPEAL

NAME OF APPLICANT \_\_\_\_\_ DATE: \_\_\_\_\_

I am providing this up-to-date and complete **LIST OF ABUTTERS** to the property identified as the subject of this appeal, and further, I understand that:

- ✓ Although I am technically responsible for the notification of the abutters, the Town of North Haven will execute notification to those listed below (to ensure consistency and timeliness of procedure); and
- ✓ Failure to notify the present-day owner of each and every abutting lot may invalidate the decision of the Board of Appeals in this matter; and
- ✓ Map and lot number, book and page numbers as recorded in the Registry of Deeds, names and addresses of abutters are available in the commitment book, assessor's office.

NAME:	MAP:	LOT:	BOOK:	PAGE:
ADDRESS:	CITY:	STATE:	ZIPCODE:	

NAME:	MAP:	LOT:	BOOK:	PAGE:
ADDRESS:	CITY:	STATE:	ZIPCODE:	

NAME:	MAP:	LOT:	BOOK:	PAGE:
ADDRESS:	CITY:	STATE:	ZIPCODE:	

NAME:	MAP:	LOT:	BOOK:	PAGE:
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NAME:	MAP:	LOT:	BOOK:	PAGE:
ADDRESS:	CITY:	STATE:	ZIPCODE:	

USE ADDITIONAL SHEET FOR MORE ABUTTERS

# ADMINISTRATIVE APPEAL APPLICATION

NAME OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Do not fill out this form if you require a variance from the Town of North Haven's Ordinance, see next page)

I hereby request from the North Haven Board of Appeals to consider an:

## ADMINISTRATIVE APPEAL

as I contest the interpretation or application of the ordinance / regulation, and I seek relief from the:  
(CHECK ONLY ONE)

- DECISION                       LACK OF ACTION

Of the following board or individual: (CHECK ONLY ONE)

- Board of Selectman                       Code Enforcement Officer  
 Planning Board

The decision/lack of action I object to is: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I object for the following reason(s) [Supported with citation(s), of pertinent ordinance(s), deeds, maps, documents, ect.]: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

USE BACK OF THIS SHEET OT ADDITIONAL SHEET AS NECESSARY

APPLICANTS/AGENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

# VARIANCE APPLICATION, Land Use Ordinance

NAME OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

(Do not fill out this form if you require an administrative appeal from the Town of North Haven's Ordinance, see previous page)

I hereby request from the North Haven Board of Appeals to consider an

## APPEAL FOR VARIANCE

which is applicable to a land use ordinance.

In requesting this variance, I understand that:

- ✓ The Code Enforcement Officer or Planning Board must have reviewed my project permit application and rendered a decision other than "approved", and
- ✓ I am agreeing that my project does not conform to the ordinance; and
- ✓ I must show that without a variance, undue hardship would be imposed on any owner of the property, not just the present owner; and
- ✓ I must satisfy the legal test for undue hardship by showing that:
  - A. The land in question cannot yield a reasonable return unless a variance is granted:
  - B. The need for a variance due to the unique circumstances of the property and not to the general conditions in the neighborhood:
  - C. The granting of a variance will not alter the essential character of the locality, and
  - D. The hardship is not the result of action taken by the applicant or prior owner

Property Identification: Map \_\_\_\_\_ Lot \_\_\_\_\_ Book \_\_\_\_\_ Page \_\_\_\_\_

Owner of record: \_\_\_\_\_

Necessity for Variance: The proposed project is non-conforming in the following ways: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Justification for Variance: The four point legal test for undue hardship can be satisfied as follows: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

(USE BACK OF THIS PAGE OR ATTACH ADDITIONAL SHEETS AS NECESSARY)

APPLICANT/AGENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_