

CHECKLIST FOR ZBA APPLICANTS

Applications to the ZBA must be received 24 days prior to a ZBA meeting, the second Thursday of each month. Check for your deadline with Town Hall, 603-284-7701 or www.sandwichnh.org

Complete the following pages for your application (use this Checklist):

- Application Pages.
- Signature page.
- Abutters' List. The names and addresses should be those of the current owners as published in the Town of Sandwich tax records. Find these on the Town website in the Avitar records. Make sure you give the mailing address, not the physical address of the abutter. Include all properties that abut your property. The accuracy of the list is your responsibility. Under the Law all abutters must be notified of the hearing on your Appeal. Failure to include any abutter might invalidate the proceedings. Your list of abutters should include yourself, your agent if you have one, and any licensed professional whose stamp is on the plan. Include the holders of any conservation easements.
- Fee Schedule. Check that you included yourself and your agent!
- Disclaimer to sign.

Submit Relevant Additional Pages

- Agent page. If you are not the owner of the property, the owner must sign this to authorize you to serve as his or her agent. If your attorney or surveyor will speak for you or assist you at the hearing, you must authorize him or her.
- Waivers. Your surveyor will help you decide if you need any Town rule or ordinance waived. Perhaps your particular case does not require that the plat show steep slopes or wetlands, for example.
- Denial of Building Permit by Town Compliance Officer
- Denial or inspection reports by any other Town or State agency
- Applicant's summary of request. Use formal letter format, addressed to Zoning Board of Adjustment
- Property tax card from property file
- Pertinent past decisions by Town boards
- Letters of support from abutters, if any
- Surveyed Plat by licensed surveyor showing all relevant details as prescribed in the *Sandwich Site Plan Review Regulations*.

Mail or deliver **Eleven (11)** sets of completed Application forms and all attachments with the appropriate Fee to:

**Town of Sandwich
Zoning Board of Adjustment
PO Box 194
Center Sandwich, NH 03227-0194**

The Town office is open Monday-Thursday, 7:30 a.m. to 5:30 p.m.

Make checks payable to the Town of Sandwich.

When your application is received, the Land Use Secretary will schedule a public hearing. Public Notice will be mailed, via verified mail, to you and to all Abutters, and if any, Agents, Licensed Professionals whose stamp is on the submitted plan, and easement holders.

Notice of the meeting will be posted at the Town Hall and two Post Offices and on the Town website www.sandwichnh.org at least **10** days prior to the Hearing.

Zoning Board of Adjustment
P.O. Box 194
Center Sandwich, NH 03227

Equitable Waiver of Dimensional Requirements
(NH RSA 674:33-a)

Applicant: _____

Mailing Address: _____

Owner: _____

Mailing Address: _____

Telephone: _____

Email: _____

If Applicant is the same as Owner write SAME, above. If not, you must complete an Agent Form, and include a statement of your vested interest.

Physical Address of Property:

Zoning District _____ Tax Map _____ Lot # _____ Lot Size _____

Shore Frontage _____ feet Road Frontage _____ feet

The property is used for year-round residential use _____, seasonal residential use _____, other (please specify) _____.

Have any previous appeals/decisions or permits (State and or Town) been made in regard to this property? _____ (If yes, attach copies)

Provide a brief description of the application. This short statement will be used in public notices of your case.

Administrative use only

CASE #

Date Filed _____

Rec. by _____

Hearing Date _____

Decision _____

Decision Date: _____

An Equitable Waiver of Dimensional Requirements is requested from:

Section _____ **Article** _____ of the Town of Sandwich Zoning Ordinance to permit:

Does the request involve a dimensional requirement, not a use restriction?

Yes ___ **No** ___

Explain how the violation has existed for ten or more years with no enforcement action, including written notice, being commenced by the Town:

OR

1. Explain how the non-conformity was not noticed or discovered by any owner, former owner, owner's agent or representative, or municipal official, until after the structure in violation had been substantially completed, or until after a lot or other division of land in violation had been subdivided by conveyance to a bona fide purchaser for value:

2. Explain how the violation was not an outcome of ignorance of the law or ordinance, failure to inquire, obfuscation, misrepresentation, or bad faith on the part of any owner, owner's agent or representative, but was instead caused by either a good faith error in ordinance calculation made by an owner or owner's agent, or by an error in ordinance interpretation or applicability made by an municipal official in the process of issuing a permit over which that official had authority:

3. Explain how the physical or dimensional violation does not constitute a public or private nuisance, nor diminish the value of the property in the area, nor interfere with or adversely affect any present or permissible future uses of any such property.

4. Explain how that due to the degree of past construction or investment made in ignorance of the facts constituting the violation, the cost of correction so far outweighs any public benefit to be gained, that it would be inequitable to require the violation to be corrected:

The undersigned applicant hereby applies for the granting of said Variance, Special Exception, Relief from Administrative Decision, Request For Rehearing, or Equitable Waiver of Dimensional Requirements under penalties of perjury; I/we represent that to the best of my/our knowledge, the data and information submitted as part of this Application is true and correct.

The undersigned applicant hereby authorizes the Zoning Board of Adjustment Members and/or Town Staff to inspect the subject property for the purpose of evaluating this Application.

Signature of Applicant _____ Date _____

Signature of Owner(s) _____ Date _____

Signature of Owner(s) _____ Date _____

ABUTTERS LIST

Name of Applicant: _____

Address: _____

(Location of property)

Tax Map # _____ Lot # _____ Zoning District _____

Address: _____

(Mailing)

ABUTTER means any person whose property adjoins or is directly across the street or stream from the land under consideration by the Zoning Board of Adjustment. For noticing purposes, it also includes the owner, applicant, any agent who may represent you, any licensed professional whose stamp is on the plan, and any easement holder. (RSA 672:3)

1. Name: _____ Tax Map No. _____ Lot No. _____

Address: _____

2. Name: _____ Tax Map No. _____ Lot No. _____

Address: _____

3. Name: _____ Tax Map No. _____ Lot No. _____

Address: _____

4. Name: _____ Tax Map No. _____ Lot No. _____

Address: _____

5. Name: _____ Tax Map No. _____ Lot No. _____

Address: _____

6. Name: _____ Tax Map No. _____ Lot No. _____

Address: _____

7. Name: _____ Tax Map No. _____ Lot No. _____

Address: _____

8. Name: _____ Tax Map No. _____ Lot No. _____

Address: _____

9. Name: _____ Tax Map No. _____ Lot No. _____

Address: _____

This Board is not responsible for the information supplied above. The most current property information is available at the County Registry's office. Also available at www.sandwichnh.org under Assessors tab. Use a separate page as necessary to list all abutters.

FEE SCHEDULE

<u>Appeal</u>	<u>Fee</u>	<u>Amount Submitted</u>
Equitable Waiver	\$50	\$ _____
<u>Associated Fees</u>		
Letters to Abutters via Certified Mail	# of letters _____ x \$10.00	\$ _____
Public Hearing Newspaper Notice	<u>\$60.00</u>	\$ _____
	Total Due	\$ _____

Please note: Fees are set by the Board of Selectmen and may not be waived by the Zoning Board of Adjustment. Fees were last amended, 4/11/22

DISCLAIMER

Name of Applicant/Agent: _____

Physical Address _____

Mailing Address: _____

Tax Map # _____ Lot # _____ Zoning District _____

Signature of Applicant/Agent: _____

The Town of Sandwich, its employees, the Planning Board and the Zoning Board of Adjustment are here to help an applicant through the process of applying for either a Site Plan Review, Boundary Line Adjustment, Subdivision of Property, Excavation Permit, Preliminary Consultation, Design Review, Scenic Road Tree Cut, Variance, Special Exception, or Appeal of an Administrative Decision, Equitable Waiver or Motion for Rehearing.

Town employees are not trained or licensed to give legal advice or to provide answers to any substantive questions (those requiring interpretation of the Town's Zoning Ordinance and/or Regulations).

There is no promise or guarantee for the outcome of an application, case or review. Land Use boards, the Planning Board and Zoning Board of Adjustment, meet in public and only make decisions at those public meetings.

The Town staff and the Land Use Secretary will gladly help with questions within these constraints. If you find that you need additional help to successfully complete the application process, please seek advice from a lawyer or surveyor.

Thank you for your understanding. We look forward to working with you.

AGENT FORM

Complete this form if Applicant is other than the Owner of the property

Agent's Name _____ Phone _____

Mailing Address _____

Give a statement of your vested interest: (You may supply this statement on a separate sheet if additional space is necessary.)

Signature of Agent _____ Date _____

The undersigned Owner hereby authorizes the above-named agent to present this Appeal and furnish all required information and for Sandwich Zoning Board of Adjustment members and/or town staff to inspect the subject property for the purpose of evaluating this Appeal.

Signature of Owner _____ Date _____

WAIVERS:

I (we) am (are) requesting a waiver* of the following:

- Section _____ of the Sandwich Zoning Ordinance
- Section _____ of the Zoning Board of Adjustment Rules of Procedure
- The requirement _____ of the Zoning Board of Adjustment Application

For the following reasons: (please use a separate page as appropriate)

I (we) understand that a denial of the waiver request may result in the application being continued until all required documents are provided.

Applicant(s) or Agent

* A waiver may be granted if the Board finds, by majority vote, that strict conformity would pose an unnecessary hardship to the applicant and waiver would not be contrary to the spirit and intent of the Board’s Regulations or that specific circumstances relative to the appeal indicate that the waiver will properly carry out the spirit and intent of the Board’s Regulations. The basis for any waiver granted by the Board shall be recorded in the minutes of the Board.

This application does not require any waivers.

Signature