

TOWN OF BRIMFIELD ZONING BOARD OF APPEALS APPLICATION FORM

ADDRESS OF PROPERTY FOR APPEAL: \_\_\_\_\_

NAME OF APPLICANT(S): \_\_\_\_\_

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

PHONE AND EMAIL: \_\_\_\_\_

OWNER OF PROPERTY: \_\_\_\_\_

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

PHONE AND EMAIL: \_\_\_\_\_

PARCEL IDENTIFICATION: ASSESSORS MAP & PARCEL NO. \_\_\_\_\_

RECORDING INFORMATION: BOOK AND PAGE: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

SECTION OF BYLAW UNDER WHICH APPLICATION IS MADE: \_\_\_\_\_

COMPLIANCE WITH ZONING:	EXISTING	PROPOSED
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USE OF STRUCTURE/PROPERTY	_____	_____
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LOT SIZE	_____	_____
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FRONTAGE	_____	_____
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SETBACKS - FRONT	_____	_____
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- REAR	_____	_____
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- SIDE	_____	_____
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NARRATIVE DESCRIPTION OF PROPOSED WORK/PROJECT, INCLUDING  
MEASUREMENTS (USE ADDITIONAL SHEETS IF NECESSARY)

STATE HOW WORK/PROPOSAL COMPLIES WITH APPROPRIATE CRITERIA (USE  
ADDITIONAL SHEETS IF NECESSARY)

DATE: \_\_\_\_\_

SIGNATURE OF APPLICANT(S) \_\_\_\_\_

\_\_\_\_\_

**Note: The Board will take no action on applications that are incomplete or that are not accompanied by a check for the filing fee. A complete submission is 8 copies of the completed application, all documents, plans and sketches submitted, including an electronic copy of all.**