



TOWN OF TOPSFIELD

TOPSFIELD, MASSACHUSETTS

ZONING BOARD OF APPEALS

APPLICATION FORM A

APPLICATION FEE \$200

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Town Hall, 8 West Common Street, Topsfield, Massachusetts 01983

Town of Topsfield
Zoning Board of Appeals

Application for Zoning Relief

Form A

Before you file this application, it is necessary that you be familiar with the requirements for filing plans and other materials in support of this application as specified in the Topsfield Zoning Bylaws and the Topsfield Zoning Board of Appeals Rules and Procedures that are available from the Town Clerk.

Incomplete applications will not be considered unless waivers are previously obtained from the Zoning Board of Appeals



BOARD USE ONLY

Date Filed:
Date Action Due
Public Hearing:
Decision:

Revised 5/06

NATURE OF APPLICATION:

- _____ Petition for Special Permit pursuant to Article ____, Section ____ of the Zoning Bylaw.
- _____ **Petition for Finding pursuant to Article ____, Section ____ of the Bylaw.**
- _____ Petition for a Variance from Article ____, Section ____, of the Zoning Bylaw.
- _____ Petition for Site Plan Review pursuant to Article IX of the Zoning Bylaw (and the Guidelines and Performance Standards for Activities Subject to the Provisions of Article IX of the Topsfield Zoning Bylaw)
- _____ Petition for a Comprehensive Permit pursuant to G.L.c. 40B, Section 20-23
- _____ Appeal from the decision dated _____ of the Building Inspector or others pursuant to L.L. c. 40A, Section 15.

DESCRIPTION OF APPLICANT:

- a. Name _____
- b. Address _____
- c. Phone Number _____
- d. Interest in Premises (e.g., owner, tenant, prospective purchaser, etc.) _____
(Attach copy of lease and/or letter of authorization from authorization from owner, if applicable)

DESCRIPTION OF PREMISES:

- a. Assessor's Map _____, Lot(s) _____, Zoning District _____
- b. Location of Premises (number and street) _____
- c. Name and address of legal owner (if different from Applicant) _____
- d. Deed to the Premises recorded at (if known):
_____ Essex South District Registry of Deeds, Book _____ Page _____
_____ Essex South Registry District of the Land Court, Certificate Number _____
- e. Prior zoning decisions affecting the Premises (if any):
Date of Decision _____ Name of Applicant _____
Nature of Decision _____
- f. Present use of the Premises _____
- g. Present structures conform to current Zoning Bylaw. _____ Yes _____ No. If no, in what respect does it not conform. _____

PROPOSAL (attach additional sheets if necessary):

- a. General Description:

b. If proposal is for construction or alteration of an existing structure, please state:

	FRONT	REAR	SIDE(S)
1. Setbacks required per bylaw	_____	_____	_____
2. Existing setbacks	_____	_____	_____
3. Setbacks proposed	_____	_____	_____

	FRONTAGE	AREA
4. Frontage and area required by bylaw	_____	_____
5. Existing frontage (s) and area	_____	_____
6. Frontage (s) and area proposed	_____	_____

	FEET	STORIES
7. Existing Height	_____	_____
8. Height proposed	_____	_____

c. Other town, state or federal permits or licenses required, if any:

NECESSARY ACCOMPANYING DATA:

It is required that every application be accompanied by appropriate supporting data. Failure to submit appropriate and complete data could result in delay and/or denial of application for zoning relief. Place a check next to the applicable accompanying supporting data:

Variance of Special Permit Applications:

(See Zoning Board of Appeals Rules and Procedures Section III)

All required supporting data attached Yes No

Site Plan Review Applications:

(See Town of Topsfield Zoning Bylaw, Article IX, Section 9.05. See also Guidelines and Performance Standards for Activities Subject to the Provisions of Article IX of the Topsfield Zoning Bylaw)

All required supporting data attached Yes No

Comprehensive Permit Applications:

(See G.L.c. 40B, Sections 20-23)

All required supporting data attached Yes No

Appeals from decisions of Building Inspector or Others:

(See Zoning Board of Appeals Rules and Procedures, Section III (1) (e))

All required supporting data attached Yes No

If all required supporting data is not attached, why not:

Date

Signature of Applicant