



# TOWN OF LANESBOROUGH ZONING BOARD OF APPEALS APPLICATION

\$50.00 Application Fee

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Attorney/Designer/Consultant

\_\_\_\_\_  
Address of Applicant

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone # of Applicant

\_\_\_\_\_  
Telephone #

\_\_\_\_\_  
Email Address of Applicant

\_\_\_\_\_  
Email Address

Type of Application:     SPECIAL PERMIT                       VARIANCE  
    APPEAL FROM DECISION OF BUILDING INSPECTOR

*Pursuant to the provisions of Chapter 40A of the General Laws of the Commonwealth of Massachusetts and the Town of Lanesborough Zoning Bylaws, application is hereby made to the Lanesborough Zoning Board of Appeals to do the following:*

Nature of Request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***(Applicant must file an original and 6 copies of this Application together with 6 copies of the Town Map for the subject property, a Plot layout defining the location of the building(s)/structure(s) relating to the lot with dimensions of the building(s) to septic systems, boundary lines and other pertinent data, and a Memorandum describing the Special Permit or Variance Application)***

Property Owner _____ Address _____ _____ Telephone _____ Email _____ Signature of Owner _____	Property Address _____ _____ Assessor's Map # _____ Lot # _____ <b><i>(copy of Map must be attached with application)</i></b> Registry of Deeds Book # _____ Page # _____ Zoning District(s) _____ (R; R-A; B; I; LB; MR)
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<i>To be completed by Town Clerk</i>		
_____	_____	_____
Date Received by Town Clerk	Date Fee Received	Method of Payment
_____		
Signature of Town Clerk		