

A Bicentennial Community  
1798 - 1998

# APPLICATION FOR AN EQUITABLE WAIVER OF DIMENSIONAL REQUIREMENTS

**DO NOT WRITE IN THIS SPACE**

**TO: Town of Farmington, New Hampshire  
Zoning Board of Adjustment**

**Tax Map & Lot #:** \_\_\_\_\_  
**Date Filed:** \_\_\_\_\_  
**Signed:** \_\_\_\_\_

**Name of Applicant:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Owner of Property Concerned:** \_\_\_\_\_  
(if same as above, write "same")

**Address:** \_\_\_\_\_  
(if same as above, write "same")

**Location of Property:** \_\_\_\_\_

**Description of Property:** \_\_\_\_\_  
(give length of frontage, sides and rear)

**Proposed use or existing use affected:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE: This application is not acceptable unless all required statements have been made. Additional information may be supplied on a separate sheet if the space provided is inadequate.**

## APPLICATION FOR AN EQUITABLE WAIVER OF DIMENSIONAL REQUIREMENTS

An Equitable Waiver of Dimensional Requirements is requested from article \_\_\_\_\_ section \_\_\_\_\_ of the Zoning Ordinance to permit \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**1. Does the request involve a dimensional requirement, not a use restriction? ( ) Yes ( ) No**

**2. Explain how the violation has existed for 10 years or more with no enforcement action, including written notice, being commenced by the town:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**- OR -**



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Explain how the nonconformity was discovered after the structure was substantially completed or after a vacant lot in violation had been transferred to a bona fide purchaser: \_\_\_\_\_

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\_\_\_\_\_ And how the violation was not an outcome of ignorance of the law or bad faith but resulted from a legitimate mistake: \_\_\_\_\_

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3. Explain how the nonconformity does not constitute a nuisance nor diminish the value or interfere with future uses of other property in the area: \_\_\_\_\_

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4. Explain how the cost of correction far outweighs any public benefit to be gained: \_\_\_\_\_

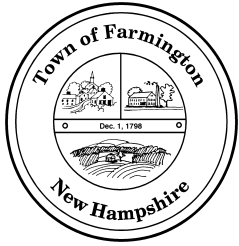
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Applicant \_\_\_\_\_ Date \_\_\_\_\_  
(Signature)

Property Owner \_\_\_\_\_ Date \_\_\_\_\_  
(Signature)



# APPLICATION FOR AN EQUITABLE WAIVER OF DIMENSIONAL REQUIREMENTS

## ZBA Application Requirements

### APPLICANTS FOR THE ZONING BOARD OF ADJUSTMENT MUST PROVIDE THE FOLLOWING:

- ❑ Seven (7) Copies of Signed Application
- ❑ Seven (7) Copies of Narrative Statement. (Narrative should be typed and address why application is being made to the ZBA and what action is requested, with specific reference to sections of the Zoning Ordinance requesting variance from, if applicable).
- ❑ Seven (7) copies of a Locus or Tax Map depicting the subject parcel(s) and direct abutting parcels.
- ❑ If an Area Variance or Equitable Waiver of Dimensional Requirements is requested, Seven (7) copies of a surveyed site plan or scaled drawing indicating all dimensions or parcel and structure(s) relative to the request.
- ❑ Three (3) Sets of mailing labels for abutter notices
- ❑ One (1) Certified Abutters List *\*If not attached, Print from Town website.*
- ❑ One (1) Signed Current Copy of the Fee Schedule *\*If not attached, Print from Town website.*
- ❑ Payment of all fees for application and Public Hearing *\*Due when application submitted.*

***NOTE: All additional copies of plans and application materials currently before the ZBA requested by Town staff and Boards shall be provided at the applicant's expense.***

***All additional copies of plans or file materials requested by the public shall cost \$1 per page. Plan sets that cannot be copied at the Municipal Offices shall cost \$5 per sheet.***

***Applications can be downloaded from the Town's website at [www.farmington.nh.us](http://www.farmington.nh.us).***



# APPLICATION FOR AN EQUITABLE WAIVER OF DIMENSIONAL REQUIREMENTS

## CERTIFIED LIST OF ABUTTERS

Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Location of Property: \_\_\_\_\_

Tax Map: \_\_\_\_\_ Lot \_\_\_\_\_

File one (1) complete copy with the Code Enforcement Office. Give name and Address of each owner of the property and all abutters including any owners of land separated by a street or any public land. Include Surveyors address as well as any Home Owners Associations, easement holder or other with a legal interest in the land or adjoining land.

Map \_\_\_\_\_ Lot \_\_\_\_\_ Name \_\_\_\_\_ Address \_\_\_\_\_

Map \_\_\_\_\_ Lot \_\_\_\_\_ Name \_\_\_\_\_ Address \_\_\_\_\_

Map \_\_\_\_\_ Lot \_\_\_\_\_ Name \_\_\_\_\_ Address \_\_\_\_\_

Map \_\_\_\_\_ Lot \_\_\_\_\_ Name \_\_\_\_\_ Address \_\_\_\_\_

Map \_\_\_\_\_ Lot \_\_\_\_\_ Name \_\_\_\_\_ Address \_\_\_\_\_

Map \_\_\_\_\_ Lot \_\_\_\_\_ Name \_\_\_\_\_ Address \_\_\_\_\_

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Map \_\_\_\_\_ Lot \_\_\_\_\_ Name \_\_\_\_\_ Address \_\_\_\_\_

Map \_\_\_\_\_ Lot \_\_\_\_\_ Name \_\_\_\_\_ Address \_\_\_\_\_

This is to certify that as of (date) \_\_\_\_\_, the names and addresses of all abutters is that of the tax record on file at the Tax Assessors Office in the Town of Farmington, NH.

\_\_\_\_\_  
Signature of Applicant

Revised 11/2005

\_\_\_\_\_  
Date