

Date Filed: \_\_\_\_\_

Fee: \_\_\_\_\_

Received by: \_\_\_\_\_

## TOWN OF HILLSBOROUGH, NH

### VARIANCE APPLICATION

This application must be completed (please type or print) and returned to the Town Office and it will be forwarded to the Zoning Board of Adjustment. You will be advised of the date and time of the public hearing before the Board of Adjustment. You must appear at the public hearing or be represented by an authorized agent or attorney in order for the Board to take action on your application. The application will be terminated or tabled for failure to appear at a scheduled public hearing. If you designate an agent or attorney to represent you in this application, you must submit a Letter of Authorization. You are fully responsible for researching and knowing any and all laws, which may be applicable and affect the outcome of the Board's decision on your application request. The Town of Hillsborough assumes no responsibility or liability relating to your failure to research and know all applicable laws including, but not limited to, state, federal and local laws, codes, land development regulations and comprehensive plan.

#### CONTACT INFORMATION:

Applicant's Name: \_\_\_\_\_

Applicant's Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone number: \_\_\_\_\_ Business Phone number: \_\_\_\_\_

Cell Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

Email (if applicable): \_\_\_\_\_

#### LEGAL DESCRIPTION OF THE PROPERTY:

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

Tax Map #: \_\_\_\_\_ Lot(s) #: \_\_\_\_\_

Subdivision Name (if known): \_\_\_\_\_

Total Acreage of the Property: \_\_\_\_\_

Current Zoning Classification of Property (including all overlay districts): \_\_\_\_\_

Existing Use(s) of Property: \_\_\_\_\_

Length of lot lines: Front \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_ Rear \_\_\_\_\_

**OWNER OF THE PROPERTY, IF DIFFERENT THAN APPLICANT:**

Owner's Name: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone number: \_\_\_\_\_ Business Phone number: \_\_\_\_\_

Cell Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

Email (if applicable): \_\_\_\_\_

**VARIANCE REQUEST**

The undersigned hereby requests a variance from Article \_\_\_\_\_, Section \_\_\_\_\_

of the Hillsborough Zoning Ordinance in order to permit the following: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CRITERIA**

In order to secure a variance, the Zoning Board must determine by law that your variance request satisfies the following criteria of the Zoning Ordinance. Please provide a written response along with any other supporting documentation for each of the following criteria. Please note that all criteria must be satisfied and supported by the Zoning Board in order for a variance to be granted. Should the space be provided be inadequate, please attach additional pages to this application.

**1. Granting the proposed Variance will not be contrary to the public interest because:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. Granting of the proposed Variance will observe the spirit of the zoning ordinance because:**

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**3. Granting the proposed Variance will do substantial justice because:**

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**4. Granting the proposed Variance will not diminish the values of the surrounding properties because:**

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**5. Literal enforcement of the provisions of the ordinance will result in an “unnecessary hardship” because:**

A. Owing to special conditions of the property that distinguish it from other properties in the area: (i) No fair and substantial relationship exists between the general public purposes of the ordinance provision and the specific application of that provision to the property; and (ii) The proposed use is a reasonable one because:

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B. If the criteria in subparagraph A, above, are not established, owing to special conditions of the property that distinguish it from other properties in the area, the property cannot be reasonably used in strict conformance with the ordinance, and a variance is therefore necessary to enable a reasonable use of it because:

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**ADDITIONAL SUBMITTALS**

The following items are required to complete the application and must be attached:

\_\_\_\_\_ A. Hearing, Abutter, and Notification Fees (\$45.00 + \$5.54/abutter, including the owner). These fees are non-refundable. Check made payable to the Town of Hillsborough.

\_\_\_\_\_ B. Six copies of plat, survey, or site plan of the subject property for which the variance is requested clearly depicting the proposed variance prepared by a licensed surveyor, civil engineer, or architect. One reduced size (11"x17") plan set is required. Submittal standards for plats shall be those as detailed in the Subdivision Regulations and/or Site Plan Review Regulations. The applicant shall retain the right to petition the Zoning Board of Adjustment to grant waivers to any plat standards as defined. In addition to these requirements, the ZBA, at its discretion, may require additional information be provided.

\_\_\_\_\_ C. Letter of Authorization to allow an Agent or Attorney to represent Applicant, if applicable.

\_\_\_\_\_ D. Affidavit of Ownership (copy of warranty deed).

\_\_\_\_\_ E. List of Abutters- A list of property abutters with mailing addresses, as defined by RSA672:3, shall be submitted. Names and addresses can be secured using tax maps and files located at the Town Office. Three sets of mailing labels for the abutters are required.

### STATEMENT OF UNDERSTANDING

I, \_\_\_\_\_ hereby certify and say that I am the owner/lessee of land included in the application and that the foregoing statement herein contained and attached, and information or attached exhibits thoroughly to the best of my ability present the arguments on behalf of the application herewith submitted and that the statements and attached exhibits are in all respects true and correct to the best of my knowledge and belief.

In addition, I understand this Variance Request must be filed with all pertinent information as it pertains to the requirements of the Hillsborough Zoning Ordinance and all other information requested or required by the Zoning Board of Adjustment in order to be considered complete. I understand that this application will not be considered filed and scheduled for hearing by the Zoning Board of Adjustment until all required information has been received, and do further understand that the Town of Hillsborough reserves the right to postpone this request until such time as the requirements are met.

Furthermore, I understand that myself, my representative as stated on the application, or my attorney should appear at the public hearing. If photographs, documents, maps or other materials are provided to the Board as evidence at the public hearing, said evidence will become property of the Town of Hillsborough and will remain on file with the town for future reference. By law those instruments automatically become part of the public records and cannot be returned.

Also, I recognize and understand that the public hearing before the Board of Adjustment regarding land development is considered quasi-judicial in nature. State and local law strictly prohibits applicants and/or interested parties from participating in ex-parte communications with Board members in person, by phone, e-mail, or in writing before the application is discussed at a public hearing.

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**APPLICANT'S PRINTED NAME:** \_\_\_\_\_

**OWNER'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**OWNER'S PRINTED NAME:** \_\_\_\_\_

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