

**APPLICATION FOR AN EQUITABLE WAIVER
OF DIMENSIONAL REQUIREMENTS**
Town of Hill Zoning Board of Adjustment

Do not write in this space: Case No: _____ Date received: _____ ZBA signature _____
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Name of applicant _____
Mail Address _____
Home Phone _____ Work Phone _____

Location of property (street address) _____
Tax Map _____ Lot _____ Sub _____
Zoning District _____

supply additional information on separate pages as necessary

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 -

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....

and how the violation was not an outcome of ignorance of the law or bad faith but resulted from a legitimate mistake _____

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 _____

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

Applicant Signature _____ Date _____