

Town of Greenfield, New Hampshire
APPEAL FROM AN ADMINISTRATIVE DECISION

To: Board of Adjustment,
Town of Greenfield, NH

Do not write in this space.
Case No. _____
Date Filed _____

(signed - ZBA)

Name of Applicant

Address

Owner

(if same as applicant, write "same")

Location of Property

(number, street)

(Map & Lot number)

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.

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Relating to the interpretation and enforcement of the provisions of the Zoning Ordinance.

Decision of the enforcement officer to be reviewed _____

_____ Number _____ Date _____

article _____ section _____ of the Zoning Ordinance in question: _____

Applicant _____ Date _____

(Signature)