TOWN OF KINGSTON, NEW HAMPSHIRE
ZONING BOARD OF ADJUSTMENT
APPLICATION

Applicant: __________________________________________ Telephone: ____________
Address: __________________________________________
Name of Owner: ____________________________________ Telephone: ____________
Property Location: __________________________________
Tax Map Reference: _________________________________
Filing Date: __________________________
Hearing Date: __________________________
Fees Paid: __________________________

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**Filing Fees**

☐ Application Fee: $50.00 - Review process before the ZBA

☐ Legal Notice Fee: $150.00 - Town's cost for placing a legal advertisement in a
local paper of general circulation announcing the public hearing as prescribed
under NH RSA 676:7, 1(b).

☐ Abutter Fee: $11.50 per - To cover the Town's cost for sending certified,
return-receipt requested letters to all property owners who abut the subject parcel
undergoing the appeals process by ZBA as prescribed in NH RSA 676:7, I(a).
The applicant shall provide three (3) sets of abutter names and addresses on
adhesive mailing lables measuring 1" x 2.5/8".

Total Fees Submitted: __________________________

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☐ Application for Variance
☐ Application for Appeal from an Administrative Decision
☐ Application for Special Exception
☐ Application for Re-hearing
☐ Application for Equitable Waiver for Dimensional Requirement
TOWN OF KINGSTON, NEW HAMPSHIRE
ZONING BOARD OF ADJUSTMENT
APPLICATION

APPLICATION FOR VARIANCE

The undersigned hereby requests a variance to the terms of Article ______________, Section ______________, of the Town of Kingston Zoning Ordinance, and asks that said terms be waived to permit _____________________________________________________________________________

__________________________________________________________________________________

I understand that failure to provide any of the information required for the filing of this application shall be cause for rejection of the application.

Applicant Signature ___________________________ Date ________________

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APPLICATION FOR APPEAL FROM AN ADMINISTRATIVE DECISION

The undersigned alleges that an error has been made in the decision, determination or requirement, by ______________________, on or about ______________________, to ______________________ in relation to Article ______________, Section ______________, of the Town of Kingston Zoning Ordinance and hereby appeals that decision.

I understand that failure to provide any of the information required for the filing of this application shall be cause for rejection of the application.

Applicant Signature ___________________________ Date ________________

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5/16/2007
TOWN OF KINGSTON, NEW HAMPSHIRE
ZONING BOARD OF ADJUSTMENT
APPLICATION

APPLICATION FOR REQUEST FOR A SPECIAL EXCEPTION

The undersigned requests that the Town of Kingston, ZBA, grant a Special Exception from the terms of Article _____________, Section ______________ of the Zoning Ordinance, Building Codes, Shoreland Protection or Wetlands.

I understand that failure to provide any of the information required for the filing of this application shall be cause for rejection of the application.

Applicant Signature ____________________________ Date ____________________________

 APPLICATION FOR RE-HEARING

The undersigned requests that the Town of Kingston, ZBA, grant a Re-hearing on a decision made on _____________, 20___. This decision (granted/denied) a(n) (Variance, Special Exception, Appeal from Administrative Decision, Equitable Waiver of Dimensional Requirement) from the terms of Article ____________, Section ______________ of the Zoning Ordinance, Building Codes, Shoreland Protection or Wetlands.

I understand that failure to provide any of the information required for the filing of this application shall be cause for rejection of the application.

Applicant Signature ____________________________ Date ____________________________

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TOWN OF KINGSTON, NEW HAMPSHIRE
ZONING BOARD OF ADJUSTMENT
APPLICATION

APPLICATION FOR EQUITABLE WAIVER OF DIMENSIONAL
REQUIREMENTS

The undersigned requests that the Town of Kingston, ZBA, grant an Equitable Waiver of
Dimensional Requirements from the terms of Article _______________, Section
_____________ of the Zoning Ordinance, Building Codes, Shoreland Protection or
Wetlands.

I understand that failure to provide any of the information required for the filing
of this application shall be cause for rejection of the application.

Applicant Signature ____________________________ Date ________________

Please attach all pertinent documents to support your application. Pertinent documents
shall include but are not limited to the following;

1. A letter of denial from the appropriate Town agency.
2. Copies of all information previously submitted to the relevant Town agency
pertaining to this application. (Applications, Drawings, sketches etc.). NOT THE
ORIGINALS. The originals remain with the relevant Town agency. It is not the
responsibility of the denying authority to provide this information to the ZBA.
3. In the case of a dimensional violation, a certified plot plan showing the deficiency
shall also be attached.