



TOWN OF MERRIMACK
Merrimack, N.H.

APPLICATION FOR AN APPEAL FROM AN ADMINISTRATIVE DECISION

Form A

To: Zoning Board of Adjustment
Town of Merrimack, N.H.

Date Filed _____

Case # _____

Tax Map Parcel (s) _____

Phone # _____

E-Mail Address _____

Name of Applicant _____

Address _____

Town/City _____

Zip Code _____

Owner of Property Concerned _____

(If same as above, write same)

Address _____

(If same as above, write same)

Location of Property _____

PLEASE COMPLETE SECTION BELOW

Attach additional sheets, maps, plans, etc if needed to explain application.

APPLICATION FOR AN APPEAL

The undersigned alleges that an error has been made in the decision, determination, requirement or order by _____ on _____ to _____
(Building/Zoning Official) (Date) (Applicant)
in relation to Section(s) _____ of the Zoning Ordinance and hereby appeals said decision for the reasons stated below.

Signed _____

Applicant's Signature

Please Print Full Name

**APPLICATION PROCEDURE FOR ZONING BOARD OF ADJUSTMENT HEARING
TOWN OF MERRIMACK, NEW HAMPSHIRE**

The following information must be filed with the Application:

- ☐ 1. Application fee and abutter notification fee;
- ☐ 2. Two (2) sets of address labels with the names and legal addresses of applicant, property owner, and all property owners abutting the subject parcel, including those directly across the street or stream.
Applicant shall certify that the abutters are as indicated in the Town of Merrimack's Assessors Office, not more than 5 days prior to day of filing.
- ☐ 3. A plot plan drawn to scale which shows lot location, lot size, setbacks and ownership of adjoining parcels of land;
- ☐ 4. A written description of work proposed, or change in use and any dimensions pertinent to construction;
- ☐ 5. Submittal of a Building Permit application, including floor plans, describing the proposed modifications and additions, as applicable.

No application shall be accepted for processing until it has been determined to be complete by the Community Development Department.

NOTIFICATIONS:

A complete application shall be submitted at least 15 days prior to the meeting date at which it is to be heard.

After submission of a complete application, your case will be placed on the next available agenda for a public hearing. You will be notified by certified mail as to time, place and date of public hearing.

HEARINGS:

At the time of the hearing, you must present your case to the Board or must authorize a representative to appear for you (SEE FORM C).

DECLARATION OF COVENANTS AND CONDITIONS:

Upon approval of a Special Exception for an Accessory Dwelling Unit (ADU), the Declaration of Covenants and Conditions shall be filed with the Hillsborough County Registry of Deeds, which restricts occupancy of the ADU to family members.

Application accepted by: _____ Date: _____

AUTHORIZATION TO ENTER UPON SUBJECT PROPERTY
FORM B
(Required for all applicants)

The applicants, by the filing of this application, hereby give permission for the members of the Merrimack Planning Board, Zoning Board of Adjustment, Conservation Commission, the Town Engineer and such agents or employees of the Town as the Planning Board, Zoning Board of Adjustment or Conservation Commission may authorize, to enter upon the property which is the subject of this application at any reasonable time for the purpose of such examinations, surveys, tests and inspections as may be appropriate to enable this application to be processed. I/We hereby waive and release any claim or right I/we may now or hereafter possess against any of the above individuals as a result of any examinations, surveys, tests and inspections conducted on my/our property in connection with this application.

Date

Owner

Owner

AUTHORIZATION FOR APPLICANT OTHER THAN THE OWNER
FORM C

I, the undersigned owner of the property at _____,
hereby verify that I have authorized _____ to apply for the
required permits from the Community Development Department of the Town of
Merrimack, New Hampshire for the following:

VARIANCE FOR _____

SPECIAL EXCEPTION FOR _____

APPEAL FROM _____

EQUITABLE WAIVER OF DIMENSIONAL REQUIREMENTS _____

NAME OF OWNER (Typed or printed) _____

Signature of Owner _____

Address of Owner _____

Date _____

ABUTTERS TO BE NOTIFIED FOR ZONING BOARD OF ADJUSTMENT HEARINGS

I hereby certify that the following information is as indicated in the Town of Merrimack

Assessor's records as of _____, 200____.

(date)

Completed application must be on file at the Community Development Department office no more than 5 days after the above date.

(Signature)

(Print name)

Abutter 1
Abutter 1 Address
City State Zip

Abutter 2
Abutter 2 Address
City State Zip

Etc.

OTHER PARTIES TO NOTIFY *(include all that apply)*

Applicant
Applicant's Address
City State Zip

Owner (if different from Applicant)
Owner's Address
City State Zip

Engineer
Engineer's Address
City State Zip

Land Surveyor
Land Surveyor's Address
City State Zip

Soil Scientist
Soil Scientist's Address
City State Zip

Also:

Any holders of any conservation, preservation, or agricultural preservation restrictions that apply to the subject property.

IMPORTANT: Attach two (2) sets of mailing labels for all parties identified above.