



**TOWN OF GILFORD, NEW HAMPSHIRE
ZONING BOARD OF ADJUSTMENT
APPLICATION FOR REQUEST FOR REHEARING**

Revised and adopted by the ZBA April 21, 2006

Name of applicant _____

Mailing address _____

Owner _____
(if same as applicant, write "same")

Street Address of property _____
(complete street address)

Tax Map _____ Lot Number _____ Zoning District _____

Phone _____

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.

The Board will not reopen a case based on the same set of facts unless it is convinced that an injustice would be created by not doing so or it is convinced that it has made a legal error.

Date of Original Action: _____ Description of Action: _____

Your completed application, along with all other necessary paperwork and fees must be submitted to the Department of Planning and Land Use within thirty (30) days of the date the decision was rendered.

The original application was for a:

- ☐ Use Variance
- ☐ Area Variance
- ☐ Special Exception
- ☐ Appeal from An Administrative Decision
- ☐ Equitable Waiver

of Article _____ Section _____.

Explain your reasons for requesting a rehearing fully (Attach additional information if necessary):

Applicant _____ Date _____
(Signature)

FOR OFFICE USE ONLY

Case No. _____ Date filed: _____ Received by: _____