

Zoning Board of Appeals

Kristen Jacobsen
Town Planner

Town of Leicester

Planning Department

Application for Variance



2 Washburn Square
Leicester MA 01524
www.leicesterma.org

V 20____ - ____

Applicant

Name of Applicant (primary contact): _____
Company: _____
Address: _____
Phone: _____ Cell: _____
Email Address: _____

Owner

Name of Owner (primary contact): _____
Address: _____
Phone: _____ Cell: _____
Email Address: _____

Request

Choose applicable Zoning Bylaw section: _____
Will the project require a: Site Plan Review: ☐ Yes* ☐ No Special Permit: ☐ Yes* ☐ No *Explain in narrative

Property

Location of Property: _____
Assessor's Tax Map/Parcel Number: _____
Deed Reference – Hampshire District Registry of Deeds Book/Page Number: _____
Plan Reference – Hampshire District Registry of Deeds Book/Plan Number: _____
Acreage: _____ Zoning District: _____
Constraints on the property; check all that apply: ☐ Wetlands ☐ Floodplain ☐ Aquifer

Proposal

Brief description of the proposal: _____

Sign

Applicant's signature: _____
Owner's signature: _____
Date: _____

Town Clerk's stamp:

Official Use Only: Preliminary Review By: _____ Date: _____
Fee: \$_____ Date Paid: _____ Check #: _____
Date of Public Hearing: _____
Decision of Board: _____
Date of Decision: _____ Expiration Date: _____