

ZONING BOARD OF APPEALS MEMBERS

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**ZONING BOARD OF APPEALS  
APPLICATION FOR ABUTTERS LIST**

**\*MUST BE FILLED OUT BY APPLICANT\***

NAME OF APPLICANT:

NAME OF PROPERTY OWNER:

PROPERTY ADDRESS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MAP \_\_\_\_\_ LOT \_\_\_\_\_

LEGAL REPRESENTATIVE:

PURPOSE FOR LIST:

\_\_\_\_\_  
\_\_\_\_\_

If the address of the subject is used, all contiguous parcels under the same common ownership will be considered as one parcel for the purpose of determining the abutters.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT/REPRESENTATIVE

**ALL INFORMATION MUST BE FILLED IN BEFORE THIS APPLICATION IS PROCESSED.**

APPLICATION WILL BE PROCESSED BY ASSESSORS' OFFICE WITHIN TEN (10) DAYS OF RECEIPT.

SCHEDULED DATE OF HEARING: \_\_\_\_\_