

TOWN OF ACUSHNET

Board of Appeals

Town Hall

122 South Main Street

Acushnet, Massachusetts 02743

Petition for Variance/Special Permit

Date:

Petitioner:

(Full Name)

(Address)

(Phone #)

Owner:

(Full Name)

(Address)

(Phone #)

Location:

(Street No.)

(Name of Street)

(Assessor's Plat)

(Lot)

Dimensions of Lot:

(Frontage)

(Depth)

(Area in Square Ft.)

Premises in present ownership since:

(Date of Purchase)

Number of existing buildings now on lot:

Size of existing buildings:

Size of proposed buildings

Present use of premises:

Proposed use of premises:

Has Building Inspector refused to issue a permit?

Provisions of the Zoning By-Law under which petition for Variance/Special Permit is made:

Please state reason for your petition:

Petitioner's Signature:

Owner's Signature:

BEFORE FILLING OUT, PLEASE READ INSTRUCTIONS ON REVERSE SIDE