

To Be Filled In By Town Clerk.

For Office Use Only

Name:

Address:

Street

Town

State

Zip

Telephone:

Home

Office

Mobile

Other:

Fax

Email

Applicant Is the (check one):

☐

Owner

☐

Tenant

☐

Prospective Buyer

☐

Agent

**Remaining information to Be Filled In By Applicant:**

The Applicant seeks permission to undertake the following construction or change in use or activity within the building. Briefly describe the project. For example: "Add a 10' by 15' addition to the front of our home as shown in the attached site plan," or, "Change the use of the existing structure on the property from Residential to Business."

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(Use additional page if required).

**Relief Requested:**

The Applicant seeks the relief from The Board of Appeals (check 1, 2 or 3):

1. ☐ REVERSE THE DECISION OF THE BUILDING INSPECTOR, who is also the Zoning Enforcement Officer. Attach a copy of the decision from which appeal is sought. State the reason for the reversal and the ruling which you request this Board to make:

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2. ☐ REQUEST FOR A SPECIAL PERMIT as described in the West Stockbridge Zoning By-Law Sections and/or for a use authorized by Special Permit and listed in the West Stockbridge Zoning By-Law. Explain if needed:

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3. ☐ REQUEST FOR A VARIANCE from The West Stockbridge Zoning By-Law. Specify all Sections of the Zoning By-Law from which relief is requested.

Specify Zoning Bylaw section(s):

Relief sought:

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**Current Owner of property (if other than Applicant):**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Street

Town

State

Zip

Telephone: \_\_\_\_\_

Home

Office

Mobile

Other: \_\_\_\_\_

Fax

Email

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DEED REFERENCE: Book No. \_\_\_\_, Page No. \_\_\_\_, Land Court No. \_\_\_\_, Plan No. \_\_\_\_. Provide copy of recent deed.

USE CLASSIFICATION (see Table of Uses in Zoning By-Law): Existing \_\_\_\_\_ Proposed \_\_\_\_\_

ZONING DISTRICT (check one): ☐ R1 ☐ R3 ☐ RD ☐ C ☐ M

LOT INFORMATION: Size/Area \_\_\_\_\_ Lot No. \_\_\_\_\_. Is the property vacant? ☐ Yes or ☐ No. If so, for how long? \_\_\_\_\_

CONSERVATION COMMISSION: Is the property within any type of wetland area or flood plain? ☐ Yes ☐ No

SCENIC MOUNTAIN ACT: Is the property within its jurisdiction? ☐ Yes ☐ No

**A PLOT PLAN PRODUCED BY A LICENSED SURVEYOR IS REQUIRED BY THE ZBA.** Have you reviewed your site plan with The Building Inspector? ☐ Yes ☐ No

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**Other Departments Reviewing this Project:**

Indicate any other Town Departments which will review or have reviewed this project. Indicate the status of their review process:

☐ Conservation Commission

☐ Planning Board

☐ Board of Selectpeople

☐ Board of Health

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**Repetitive Petition:**

Is this a re-application? ☐ Yes ☐ No Have you met with The Planning Board? ☐ Yes ☐ No If yes, describe results? \_\_\_\_\_

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**Prior Relief:**

If the property in question has been the subject of a prior application to the Board of Appeals, indicate the timing, nature and outcome of the process and give any additional information. \_\_\_\_\_

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**Building Inspector Comments:**

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**SUBMIT DIRECTLY TO TOWN CLERK WITH APPLICATION FEE OF \$350.**

Building Inspector's Signature

Date

Applicant Signature

Owner's Signature