

APPLICATION CHECK SHEET
HAMILTON ZONING BOARD OF APPEALS

SPECIAL PERMIT

8 copies of all Materials. Refer to Instruction Sheet.

Section of the Zoning By-Law covering desired Board action(s) _____

Special Permit Requested. Check all that apply.

District:	Type Use:
<input type="checkbox"/> Residential District	<input type="checkbox"/> _____
<input type="checkbox"/> Business District	<input type="checkbox"/> _____
<input type="checkbox"/> Conservancy District	<input type="checkbox"/> _____
<input type="checkbox"/> Elder Housing District	<input type="checkbox"/> _____
<input type="checkbox"/> Groundwater Protection Overlay	<input type="checkbox"/> _____
<input type="checkbox"/> Telecommunications	<input type="checkbox"/> _____
<input type="checkbox"/> Other. Specify. _____	<input type="checkbox"/> _____

Time Period Granted for Permit:

- Temporary Additional Living Area: 4 years
- Adult Entertainment Uses: 1 year
- Special permit will lapse after 1 year if substantial use or construction has not commenced except for good cause.

Visual Materials Required:

- Submit at a minimum materials required for Site Plan Review
- Refer to Specific Sections of the By-Law for additional information regarding each district

Board Reviews Required other than ZBA:

- Elder Housing District: Requires Planning Board approval
- Residential District – Golf, tennis, swimming, riding, polo, skiing, skating, all other athletic and recreational activities/special events – where charges or admission fees are required: Requires Board of Selectmen approval



**TOWN OF HAMILTON
ZONING BOARD OF APPEALS**

**REQUEST FOR FINDINGS OF FACT
PERMIT OR SPECIAL PERMIT**

Date Submitted: _____

Applicant Name: _____

Applicant Address: _____

State nature of and location for which Permit or Special Permit is sought:

State how or why the proposed use would be in harmony with the general purpose and intent of the Zoning By-Law:

State how or why the specific site is an appropriate location for such use:

State whether the specific site has adequate public sewerage and water facilities or suitable soil for an on lot sewerage and water systems:

State how or why the use as developed will not adversely affect the neighborhood:

State why there will not be a nuisance or serious hazard to vehicles or pedestrians using the following streets for the purpose of this permit:

Streets: _____

State how and what adequate and appropriate facilities will be provided for the proposed use:

Signed: _____

Address: _____

Phone: _____