

**ZONING BOARD OF ADJUSTMENT
Town of Salem, New Hampshire**

REHEARING APPLICATION

Name of Appealing Party: _____ **Tele #:** _____

Address of Appealing Party: _____

Status of Appealing Party: (Circle one) **Owner/Applicant** **Applicant** **Abutter**

Address of Property: _____

Owner of Property: _____ **Tele #:** _____
If same as above, write same.

Address of Owner: _____
If same as above, write same.

Location of Property: **Map #:** _____ **Lot #:** _____

Zoning Classification: _____

On _____, 20____, the Board of Adjustment considered an application for a
(Month / Day)

_____ **brought by** _____
(type of petition) (Name of Applicant)

for property located at _____
(property address)

On _____, 20____, the Board of Adjustment voted to _____
(Month / Day) (Grant or Deny)

the application.

**The action of the Board of Adjustment was unlawful and unreasonable, and it is respectfully requested
that the Board grant a rehearing on this matter for the following reasons. (Use additional sheets if
necessary)**

The undersigned acknowledge that to the best of their knowledge all of the above information is true and correct.

Signature of Appealing Party

Date

FOR MUNICIPAL USE ONLY

Case #: _____

Date filed: _____

(Must be 30 days or less from dated of decision)

Fee \$: _____

Check #: _____

Building Department Signature: _____