

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

GENERAL

APPEAL FROM AN ADMINISTRATIVE DECISION APPLICATION

Name of Applicant: _____ **Tel #:** _____

Address of Property: _____

Owner of Property: _____ **Tel #:** _____

If same as above, write same

Address of Owner: _____

If same as above, write same

Location of Property: Map _____ Lot _____

Zoning Classification _____

The undersigned hereby requests an Appeal from an Administrative Decision in relation to Article _____, Section _____, of the Zoning Ordinance.

The decision of the Administrative Office to be reviewed is as follows: _____

The undersigned alleges that the decision appealed from is incorrect for the following reasons:

By filing this application you are authorizing us to come onto your property to do necessary site inspections.

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

Signature of Applicant

Date

Signature of Property Owner

Date