



Town of Halifax Commonwealth of Massachusetts

Zoning Board of Appeals

499 Plymouth Street • Halifax, MA 02338 • 781-293-1736

APPLICANT CHECKLIST: COMPLETE & RETURN TO THE ZONING BOARD OF APPEALS

A. FROM THE BOARD OF ASSESSOR’S OFFICE (checklist):

- ___ A “Request for Abutter’s List” by the applicant for a Certified Abutter’s List: \$25.00 fee.
[It is highly recommended that this request be submitted ASAP as the Assessor’s Office has 10 days to provide the information and is required as part of the application process.]

B. FROM THE TOWN CLERK’S OFFICE (checklist):

[NOTE: The Town Clerk’s Office is unable to accept applications for the Zoning Board of Appeals unless the following items are included with the application. Improper or incomplete filings will result in a delay in the hearing.]

Four (4) application packets, completed with the following forms included in each of the four (4) packets:

- ___ Denial letter from the Building Inspector *[if the particular circumstances of the application have involved the refusal by the Building Inspector to issue a building permit].*
- ___ Plan(s) showing the changes you wish to make to your home and drawn to a scale *[Please specify the scale being used.]*
- ___ Plans(s) should be a **certified plot plan** showing lot lines with proper angles and siting of all structures, proposed and existing, with all setbacks and pertinent features of the lot(s) including height measurements and leaching fields, if applicable.
- ___ “Application for Hearing for a Variance/Special Permit” form, filled in completely.
- ___ Payment of the applicable fees* to process the application packet accordingly.

[Note: “Request for Abutter’s List” form needs to be included. The request should have been submitted to the Board of Assessor’s in a timely manner. When the list is complete, the Assessor’s Office will forward it to the Town Clerk’s Office.]

C. FROM THE APPLICANT(S) (please circle “YES” or “NO”):

- Does your application require the approval of the Board of Health? YES NO
- Does your application require the approval of the Planning Board? YES NO
- Does your application require the approval of the Board of Selectmen? YES NO
- Does your application require the approval of the Conservation Commission? YES NO
- Does your application require the approval of another Board, Committee YES NO
 and/or Department? (If so, please list): _____

Signature of Applicant(s): <i>(required)</i>	
Date: <i>(required)</i>	
Phone: <i>(required)</i>	
Email: <i>(required)</i>	