



**BOARD of ADJUSTMENT**  
**Town of Hollis**

Seven Monument Square  
Hollis, New Hampshire 03049  
Tel. 465-2209 FAX 465-3701

Date Submitted \_\_\_\_\_

ZBA Case # \_\_\_\_\_

Hearing Date \_\_\_\_\_

**APPLICATION FOR AN APPEAL FROM AN ADMINISTRATIVE DECISION**

Property Location \_\_\_\_\_

Map \_\_\_\_\_ Lot \_\_\_\_\_ Acres \_\_\_\_\_ Zone \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_

Name of Owner \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_

**Required Information:** Application shall include: scale drawing showing; plot plan, boundaries, dimensions, abutters, adjacent roads, and rights of way, location of buildings, well, septic system, photos (when applicable) and floor plans (when applicable).

**Please list all abutters (use additional sheet if needed)**

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

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

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

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

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

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

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

**Appeal from an Administrative Decision**

The Undersigned alleges that an error has been made by \_\_\_\_\_

on (date) \_\_\_\_\_ to (person requesting permit) \_\_\_\_\_

in relation to Section \_\_\_\_\_

Paragraph \_\_\_\_\_ of the Zoning Ordinance of the Town of Hollis and hereby  
appeals said decision.

Please describe error:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Owner of Property)

*The Hollis Zoning Board of Adjustment may conduct an on-site inspection of the property under consideration.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Owner of Property)