

**TOWN OF ALTONA  
APPLICATION FOR ZONING BOARD OF APPEALS**

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**Zoning Enforcement Officer's Use:**

**ZONING BOARD NO.** \_\_\_\_\_ **DATE RECEIVED:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
**Application for: Map No.** \_\_\_\_\_ **Parcel No.** \_\_\_\_\_

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1. Applicant's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone/Email: \_\_\_\_\_

2. Application is made for:
- Area Variance
  - Use Variance
  - Interpretation of the Zoning Law or Map
  - Appeal from a decision of the Zoning Enforcement Officer

3. This request relates to the following section (s) of the Town of Altona Zoning Law:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Describe the nature of the request in detail:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. In the case of a variance, provide justification that the request meets the criteria that must be met in order for the Zoning Board of Appeals to approve the variance:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Attach a copy of a completed Application for Building and Zoning Permit, including the site plan map if relevant.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Applicant Signature

Date

**FOR USE OF THE ZONING BOARD OF APPEALS:**

This application is: \_\_\_\_\_ Approved.  
                                  \_\_\_\_\_ Approved with modifications or conditions.  
                                  \_\_\_\_\_ Disapproved

Modifications, conditions, or reasons for disapproval:

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Chairperson, Town of Altona  
Zoning Board of Appeals

Date