

**APPLICATION FOR APPEAL FROM AN
ADMINISTRATIVE DECISION**

To: Zoning Board of Adjustment
Town of Hudson

**Entries in this box are to be filled out by
Land Use Division personnel**

Case No. _____

Date Filed _____

Name of Applicant _____ Map: _____ Lot: _____ Zoning District: _____

Telephone Number (Home) _____ (Work) _____

Mailing Address _____

Owner _____

Location of Property _____
(Street Address)

Signature of Applicant _____ Date _____

Signature of Property-Owner(s) _____ Date _____

By filing this application as indicated above, the owner(s) hereby give permission to the Town of Hudson, it's officials, employees, and agents, including the members of the Zoning Board of Adjustment (ZBA), as well as, abutters and other interested members of the public, to enter upon the property which is the subject of this application during any public meeting conducted at the property, or at such reasonable times as may be authorized by the ZBA, for the purpose of such examinations, surveys, tests and inspections as may be deemed appropriate by the ZBA. The owner(s) release(s) any claim to or right he/she (they) may now or hereafter possess against any of the above identified parties or individuals as a result of any such public meeting, examinations, surveys, tests and/or inspections conducted on his/her (their) property in connection with this application.

If you are not the property owner, you must provide written documentation signed by the property owner(s) to confirm that the property owner(s) are allowing you to speak/represent on his/ her/ their behalf or that you have permission to seek the described Appeal From An Administrative Decision.

Items in this box are to be filled out by Land Use Division personnel

Date received: _____

COST:

Application fee (processing, advertising & recording) (**non-refundable**): \$ 185.00

Abutter Notice:

_____ Direct Abutters x Certified postage rate \$ _____ = \$ _____

_____ Indirect Abutters x First Class postage rate \$ _____ = \$ _____

Total amount due: \$ _____

Amt. received: \$ _____

Receipt No.: _____

Received by: _____

By determination of the Zoning Administrator, the following Departmental review is required:

Engineering _____ Fire Dept. _____ Health Officer _____ Planner _____ Other _____

TOWN OF HUDSON, NH

Application Checklist

The following **requirements/checklist** pertain to the Zoning Board of Adjustment applications. Fill in all portions of this Application Form(s) as applicable. This application will not be accepted unless all requirements have been made. Additional information may be supplied on a separate sheet if space provided is inadequate.

Applicant Initials		Staff Initials
_____	Please review the application with the Zoning Administrator or staff.	_____
_____	The applicant must provide the original (with wet signatures) of the complete filled-out application form <u>and</u> all required attachments listed below together with 10 (ten) <u>single-sided</u> copies of the assembled application packet. (Paper clips, no staples)	_____
_____	A separate application shall be submitted for each request, with a separate application fee for each request i.e.: Variance, Special Exception, Home Occupation Special Exception, Appeal from an Administrative Decision, and Equitable Waiver but only one abutter notification fee will be charged for multiple requests. If paying by check, make the check payable to the Town of Hudson.	_____
_____	If the applicant is not the property owner(s), the applicant must provide to the Town written authorization, signed and dated by the property owner(s), to allow the applicant or any representative to apply on the behalf of the property owner(s). (NOTE: if such an authorization is required, the Land Use Division will not process the application until this document has been supplied.)	_____
_____	Provide two (2) sets of mailing labels from the abutter notification lists (Pages 4 & 5) prepared by applicant, with the proper mailing addresses, must be dated within (30) thirty days of submittal of the application. The abutter lists can be obtained by using the Hudson Geographical Information System (GIS) on the town website: https://www.hudsonnh.gov/community-development/page/gis-public-use (NOTE: the Land Use Division cannot process your application without the abutter lists. It is the applicant's responsibility to ensure that the abutter lists are complete and correct. If at the time of the hearing any applicable property owner is found not to have been notified because the lists are incomplete or incorrect, the Zoning Board will defer the hearing to a later date, following notification of such abutters.)	_____
_____	GIS LOCATION PLAN: Requests pertaining to above-ground pools, sheds, decks and use variances, the application must include a GIS location plan with dimensions pertaining to the subject for ZBA relief. A copy of the GIS map can be obtained by visiting the town website: https://www.hudsonnh.gov/community-development/page/gis-public-use	_____
_____	Provide a copy of all single sided pages of the assessor's card. (NOTE: these copies are available from the Assessor's Office)	_____
_____	A copy of the Zoning Administrator's correspondence confirming either that the requested use is not permitted or that action by the Zoning Board of Adjustment is required must be attached to your application.	_____
_____	If there is Wetland Conservation District (WCD) Impact, a Conditional Use Permit may be required. WCD Impact? Y or N (circle one). If yes, submit an application to the Planning Board.	_____

CERTIFIED PLOT PLAN:

Requests other than above-ground pools, sheds, decks and use variances, the application must include a copy of a certified plot plan from a licensed land surveyor. The required plot plan shall include all of the items listed below. Pictures and construction plans will also be helpful.

(NOTE: it is the responsibility of the applicant to make sure that all of the requirements are satisfied. The application may be deferred if all items are not satisfactorily submitted).

- a)_____ The plot plan shall be drawn to scale on an 8 ½” x 11” or 11” x 17” sheet with a North pointing arrow shown on the plan. _____
- b)_____ The plot plan shall be up-to date and dated, and shall be no more than three years old. _____
- c)_____ The plot plan shall have the signature and the name of the preparer, with his/her/their seal. _____
- d)_____ The plot plan shall include lot dimensions and bearings, with any bounding streets and with any rights-of-way and their widths as a minimum, and shall be accompanied by a copy of the GIS map of the property.
(NOTE: A copy of the GIS map can be obtained by visiting the town website:
<https://www.hudsonnh.gov/community-development/page/gis-public-use>)
- e)_____ The plot plan shall include the area (total square footage), all buffer zones, streams or other wetland bodies, and any easements (drainage, utility, etc.) _____
- f)_____ The plot plan shall include all existing buildings or other structures, together with their dimensions and the distances from the lot lines, as well as any encroachments. _____
- g)_____ The plot plan shall include all proposed buildings, structures, or additions, marked as “PROPOSED,” together with all applicable dimensions and encroachments. _____
- h)_____ The plot plan shall show the building envelope as defined from all the setbacks required by the zoning ordinance. _____
- i)_____ The plot plan shall indicate all parking spaces and lanes, with dimensions. _____

The applicant and owner have signed and dated this form to show his/her awareness of these requirements.

Signature of Applicant(s)

Date

Signature of Property Owner(s)

Date

ALL DIRECT ABUTTERS

List name(s) and mailing addresses of the owner(s) of record of the property and all direct abutters as of the time of the last assessment of taxation made by the Town of Hudson, including persons whose property adjoins or is directly across the street or stream from the land under consideration. For abutting properties being under a condominium or other collective form of ownership, list the mailing address of the officers of the collective or association only. If at the time of your hearing, any applicable property owner is found not to have been notified because your lists are incorrect or incomplete, the Zoning Board will defer your hearing to a later date following notification of such abutters.

(Use additional copies of this page if necessary)

MAP	LOT	NAME OF PROPERTY OWNER	MAILING ADDRESS
		*Include Applicant & Owner(s)	

ALL INDIRECT ABUTTERS WITHIN 200 FEET

List name(s) and mailing addresses of all indirect abutters (those whose property is not contiguous but is within 200 feet from the property in question) as of the time of the last assessment of taxation made by the Town of Hudson. For indirect abutting properties being under a condominium or other collective form of ownership, list the mailing address of the officers of the collective or association only. If at the time of your hearing, any applicable property owner is found not to have been notified because your lists are incorrect or incomplete, the Zoning Board will defer your hearing to a later date following notification of such abutters.

(Use additional copies of this page if necessary)

MAP	LOT	NAME OF PROPERTY OWNER	MAILING ADDRESS

APPEAL FROM AN ADMINISTRATIVE DECISION

Per Hudson Zoning Ordinance, Article XV, Enforcement and Miscellaneous Provisions, Section 334-81, Appeals: Any person aggrieved by a decision of the Zoning Administrator or other officer of the Town charged with administering this chapter may appeal to the ZBA. Such an appeal must be made within 30 days from the date of the order or decision complained of, in writing addressed to the Clerk of the ZBA.

DATE:_____ARTICLE:_____SECTION:_____

of the Zoning Ordinance in question.

Relating to the interpretation and enforcement of the provisions of the Zoning Ordinance, Please indicate the Zoning Determination Decision or Code Enforcement Violation of the Zoning Administrator to be reviewed:

Please explain why you are appealing the Zoning Administrator's Decision.

[illegible]

NOTE: If you are appealing an Administrative Decision, a copy of the decision appealed must be attached to your application.