#### APPLICATION FOR AN EQUITABLEWAIVER

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)	
(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 Equitable Waiver.

Items in this box are to be filled out by La	and Use Division pe	ersonnel
	Date receive	d:
COST:		
Application fee (processing, advertising & recording)	(non-refundable):	\$ <u>185.00</u>
<u>Abutter Notice</u> :		
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 follo	wing Departmental r	review is required:
Engineering Fire Dept Health Officer	PlannerOth	ier

## 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 complete collated application (includes all checklist items) with the Zoning Administrator or staff <b>before making copies in next step.</b>	
	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 thirteen (13) <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).	
	( <b>NOTE</b> : 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	
	( <b>NOTE</b> : 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 <b>single sided pages</b> of the assessor's card.  ( <b>NOTE</b> : 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 <u>other than</u> above-ground pools, sheds, decks and use variances, the application must include a copy of a certified plot plan from a NH 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) b)	pointing arrow shown on the plan.	an 8 ½" x 11" or 11" x 17" sheet with a North ted, and shall be no more than three years old.	
c)	The plot plan shall have the signature and	I the name of the preparer, with his/her/their seal.	
d)		•	
e)	The plot plan shall include the area (tota other wetland bodies, and any easement	al square footage), all buffer zones, streams or	
f)		ouildings or other structures, together with their	r
g)		buildings, structures, or additions, marked as	
h)		nvelope as defined from all the setbacks require	ed
i)	The plot plan shall indicate all parking s	spaces and lanes, with dimensions.	
The applica	nnt and owner have signed and dated th	is form to show his/her awareness of these r	equirements
Signature of Applicant(s)		Date	_
Signature of	Property Owner(s)		-

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#### 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

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# APPLICATION FOR AN EQUITABLE WAIVER OF DIMENSIONAL REQUIREMENT Select Option 1 or Option 2 only

### Per RSA674:33-a, I, Equitable Waiver of Dimensional Requirement: (OPTION 1)

When a lot or other division of land, or structure thereupon, is discovered to be in violation of a physical layout or dimensional requirement imposed by a zoning ordinance enacted pursuant to RSA 674:16, the Zoning Board of Adjustment shall, upon application by and with the burden of proof on the property owner, grant an equitable waiver from the requirement, if and only if the board makes all of the following findings:

	olation had been subdivided by conveyance to a bona fide purchase	i ioi vaiuc,
INNOCE	ENT MISTAKE Explain how the violation was not an extrama of	ignorongo o
the law of part of an good faith an error is	ENT MISTAKE. Explain how the violation was not an outcome of it ordinance, failure to inquire, obfuscation, misrepresentation, or backy owner, owner's agent or representative, but was instead caused by the error in measurement or calculation made by an owner or owner's nordinance interpretation or applicability made by a municipal official fissuing a permit over which that official had authority; and	d faith on the either a agent, or by
a public o	SANCE. Please explain how the physical or dimensional violation of private nuisance, nor diminish the value of other property in the adversely affect any present or permissible future uses of any such property.	rea, nor inte
	ORRECTION COST. Please explain how that due to the degree of ment made in ignorance of the facts constituting the violation, the co	
far outwe	eighs any public benefit to be gained, that it would be inequitable to to be corrected.	

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Rev. July 22, 2021

# APPLICATION FOR AN EQUITABLE WAIVER OF DIMENSIONAL REQUIREMENT Select Option 1 or Option 2 only

Per RSA674:33-a, II, Equitable Waiver of Dimensional Requirement: (OPTION 2)

II. In lieu of the findings required by the board under subparagraphs I(a) and (b), the owner may demonstrate the following to the satisfaction of the board:

no enforcement action, including written notice of violation, has been commenced against the ation during that time by the municipality or any person directly affected; and
<b>NO NUISANCE</b> . Please explain how the physical or dimensional violation <u>does not</u> constitute a public or private nuisance, nor diminish the value of other property in the area, nor interfere with or adversely affect any present or permissible future uses of any such property; <u>and</u>
HIGH CORRECTION COST. Please explain how that due to the degree of past construction or investment made in ignorance of the facts constituting the violation, the cost of correction so far outweighs any public benefit to be gained, that it would be inequitable to require the
violation to be corrected.