



Building, Zoning and Licensing Services

31 Wakefield Street, Rm 107
Rochester, NH 03867
(603) 332-3508 Fax (603) 509-1912

Appeal of Administrative Decision Application Checklist

- A copy of the Administrative Decision **must** be attached.
- Complete the application form.
- A narrative explaining why you feel the administrative decision was in error.
- Attach sketches, plot plans, photographs, construction plans, or any other materials that may help explain the proposal. Include copies of any prior applications concerning the property.
- Application fee \$175.00 - make check payable to City of Rochester
- Complete the abutter's list. The Building, Zoning & Licensing Department will mail a public hearing notice to each abutter. The applicant is to pay the certified fee for each legal abutter (\$3.78 for each abutter) check made payable to the City of Rochester

All of the above information must be completed and submitted to the Building and Zoning Office **within 30 days** of the original decision.

If you have any questions with any of these requirements, please call Karen at 332-3976.

ADMINISTRATIVE DECISION APPEAL

TO: BOARD OF ADJUSTMENT
CITY OF ROCHESTER

DO NOT WRITE IN THIS SPACE

CASE NO. _____

DATE FILED _____

ZONING BOARD CLERK _____

Phone No _____

Name of applicant _____

Address _____

Owner of property concerned _____
(if the same as applicant, write "same")

Address _____
(if the same as applicant, write "same")

Location of property _____

Map No. _____ Lot No. _____ Zone _____

Description of property _____
(give length of lot lines frontage side rear lines)

Proposed use or existing use affected _____

APPEAL OF AN ADMINISTRATIVE DECISION

The undersigned alleges that an error has been made in the decision determination or requirement

of _____ on _____
name of enforcement officer date

to _____ in relation to Article _____

Section _____ of the _____ and hereby appeals said decision.

Signed _____
(Applicant)

ABUTTER LIST

City of Rochester, NH

Please Print or Type

Applicant: _____ Phone _____

Project Address: _____

List the names and addresses of all parties below. For abutting lot owners, list each owner whose lot adjoins or is directly across the street or a body of water from the subject property. This form may not be completed more than five (5) days prior to the application deadline.

LEGAL OWNER OF SUBJECT LOT

Map	Lot	Zone	Owner Name	Mailing Address

ABUTTING LOT OWNERS

Map	Lot	Owner Name	Owner Mailing Address (NOT property location)

See Zoning Secretary

PROFESSIONALS AND EASEMENT HOLDERS. Engineers, Surveyors, Soil Scientists, and Architects whose seal appears or will appear on the plans (other than any agent submitting this application); holders of conservation, preservation, or agricultural easements; and upstream dam owners/NHDES.

Name of Professional or Easement Holder	Mailing Address

I, the undersigned, acknowledge that it is the responsibility of the applicant or his/her agent to fill out this form. I understand that any error or omission could affect the validity of any approval. The names and address listed on this form were obtained from the City of Rochester Assessing Office computer – Assess Pro (located in the Revenue Bldg at 19 Wakefield Street)

on this date: _____, This is page ____ of ____ pages.

Applicant or Agent: _____

Planning Staff Verification: _____ Date: _____