



# City of Rochester, New Hampshire

## *Zoning Board of Adjustment*

### **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.
- ☐ If the applicant is not the property owner, he/she must supply a note signed by the property owner stating his/ her knowledge of the application being submitted to the Zoning Board of Adjustment. The property owner will receive a copy of the public hearing notice by certified mail along with the abutters.
- ☐ Attach sketched, site plans, photographs, construction plans, or any other materials that may help explain the proposal. Include copies of any prior applications concerning the property.
- ☐ Abutter's list. **This information must be obtained from the Planning Department. The applicant must pay the cost of the certified fee for each abutter, applicant and any other applicable person.** (See Zoning Clerk for current fee)
- ☐ Application fee of \$175.00. Check made payable to City of Rochester.
- ☐ One PDF form of your application packet is due as well as paper 10 paper copies.

**All of the above information must be completed and submitted to the Planning Department on or before the deadline date, or the application will be considered incomplete and will be postponed until the next scheduled meeting, or until all the requirements have been met.**

**NOTE:** All applications will be allowed one postponement of the hearing in their application, and shall notify the Planning Department in writing of their intent to postpone hearing at least two days prior to the meeting at which their application is to be considered. If the applicant requests a second postponement of the hearing, the application will be considered to have been withdrawn and the applicant must file a new application with the Board in order to receive a hearing. The provisions of this paragraph shall not apply to any postponement requested by an applicant as a result of the inability of the Zoning Board of Adjustment to provide the applicant with a five-member board for the hearing on the application.

**The applicant or their representative MUST attend the Zoning Board of Adjustment meeting to present their case, or no action will be taken.**

If you have any questions with any of these requirements, please contact the Zoning Clerk Crystal Galloway.

Phone: (603)335-1338 or E-mail: [crystal.galloway@rochesternh.net](mailto:crystal.galloway@rochesternh.net)



# City of Rochester, New Hampshire

## *Zoning Board of Adjustment*

### Appeal of Administrative Decision Application

**TO: BOARD OF ADJUSTMENT  
CITY OF ROCHESTER**

**DO NOT WRITE IN THIS SPACE**

**CASE NO.** \_\_\_\_\_

**DATE FILED** \_\_\_\_\_

**ZONING BOARD CLERK**

Applicant: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Property Owner: \_\_\_\_\_

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

Appeal Address: \_\_\_\_\_

Map Lot and Block No: \_\_\_\_\_

Description of Property (give length of lot lines): \_\_\_\_\_

Proposed use or existing use affected: \_\_\_\_\_

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

\_\_\_\_\_ on \_\_\_\_\_ to \_\_\_\_\_  
Name if enforcement officer date decision

in relation to Article \_\_\_\_\_ Section \_\_\_\_\_ of the \_\_\_\_\_ and hereby  
ordinance  
appeals said decision.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_