



TOWN OF HOLLISTON
ZONING BOARD OF APPEALS
TOWN HALL
HOLLISTON, MASSACHUSETTS 01746

APPLICATION FOR GRANT OF A SPECIAL PERMIT

Date Filed: _____

Applicant's Name: _____

Applicant's Address: _____

Applicant's Phone Number: _____

Owner's Name: _____

Owner's Address: _____

The Owner hereby appoints _____ to act as his/her/its agent for the purposes of submitting and processing this application for a special permit.

The Owner's title to the land that is the subject matter of this application is derived under deed from _____, dated _____

And recorded in _____ Registry of Deeds, Book _____, Page _____

Or Land Court Certificate of Title No. _____, registered in

District Book _____, Page _____.

The land is shown in the Assessor's records as Lot _____ on Map _____, Block _____

And has an address of or is located at _____

in the _____ zoning district.

Under the provisions of Section VI-D (2) to vary the terms of Section I-B and the following, the Applicant hereby petitions the Board of Appeals:

Nature and subject matter of Special Permit:

Section of Zoning Bylaw that permits this use by grant of Special Permit:

Previous Zoning Information (To be completed by Inspector of Buildings):

The Applicant presents the following evidence that supports the grant of the special Permit:

a. The use is in harmony with the general purpose and intent of the bylaw because:

b. The general or specific provisions of a grant of a special permit, as set forth in the zoning bylaw are satisfied because:

Will the proposed use include the storage or process of any hazardous substances?

Yes _____ (Please attach additional information.) No _____

Applicant's Signature: _____

Owner's Signature: _____