

**Town of Hillsborough, NH**  
**Zoning Board of Adjustment**  
**FORM A – Application Cover Sheet**

**Case No.** \_\_\_\_\_  
**Date Received** \_\_\_\_\_

Office Use Only

**1. Applicant Information**

Name \_\_\_\_\_

Company Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Preferred Phone No. \_\_\_\_\_ Email Address \_\_\_\_\_

**2. Property Owner Information** [ ] Same as Applicant [ ] Multiple Owners (attach list)

Name \_\_\_\_\_

Company Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Preferred Phone No. \_\_\_\_\_ Email Address \_\_\_\_\_

**3. Property Information**

Address \_\_\_\_\_

Map(s) \_\_\_\_\_ Lot(s) \_\_\_\_\_ Total Acres \_\_\_\_\_

Zoning District(s) \_\_\_\_\_ Other Districts(s) \_\_\_\_\_

Existing Use of Property \_\_\_\_\_

**4. Application Type** (Check all that apply)

[ ] Administrative Appeal

[ ] Variance

[ ] Special Exception

[ ] Equitable Waiver of Dimensional Requirement

[ ] Request for Rehearing

**Applicable Statutes**

[\[RSA 674:33.I\(a\)\]](#)

[\[RSA 674:33.I\(b\)\]](#) & [\[RSA 674:33.V\]](#)

[\[RSA 674:33.IV\]](#)

[\[RSA 674:33-a\]](#)

[\[RSA 677:2\]](#) & [\[RSA 677:2\]](#)

**Other Forms Required**

B, N

C, N

D, N

E, N

F

**5. Description of Project/Proposal**

[ ] Check here if description is attached

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**6. Fee Calculation**

Applications are subject to the fees indicated below. Please use the following table to calculate the amount of fees due to the Town.

Item	Fee	Unit	Quantity	Total
Administrative Appeal	\$25.00	Per application		
Variance (all types)	\$75.00	Per application		
Special Exception	\$75.00	Per application		
Equitable Waiver of Dimensional Requirement	\$75.00	Per application		
Request for Rehearing	\$25.00	Per application		
<b>Subtotal</b>				

Applications requiring public hearings are also subject to the following fees:

Item	Fee	Unit	Quantity	Total
Certified Notice of Hearing	\$10.00	Per address		
Certified Notice of Decision to Applicant	\$10.00			\$10.00
Newspaper Legal Notice		N/A	N/A	\$50.00
Recording Fee				\$18.00
<b>Subtotal</b>				

\*Decisions consisting of more than two pages will require an additional \$4.00/page to be paid prior to the issuance of any other permits.

**TOTAL \$** \_\_\_\_\_

**PLEASE NOTE:** All fees must be paid by the applicant at the time of filing the application with the designated agent of the Board. Failure to pay all applicable fees as determined by the Town will be valid grounds for refusal to accept the application as complete or for disapproval of the application.

In reviewing applications, the Board may contract with consultants to review all or portions of an application. This review shall be at the applicant's expense and related costs shall be paid in advance. The Board, at its discretion, may request that an applicant prepare special studies, or contract with a consultant to perform these studies, at the applicant's expense.

All fees must be paid by check payable to "The Town of Hillsborough, NH".

**7. Acknowledgement and Signature**

The named Applicant must sign this application where indicated below. The Owner(s) of the subject property shall also sign where indicated below or submit a signed original letter authorizing the applicant to submit the application on their behalf. All correspondence and notices from the Town regarding the project and any plans will be transmitted to the Applicant.

By signing this application, the Applicant and Owner(s) are indicating that all information contained in this application and all supporting and accompanying plans, documents and attachments are complete, true and accurate to the best of their knowledge. The Applicant and

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Owner(s) further agree that if any such information is found to be false or misleading, any permit or other approval granted on the basis of such information shall be deemed null and void.

In addition, it is understood this application must be filed with all pertinent information as it pertains to the requirements of the Hillsborough Zoning Ordinance and all other information requested or required by the Zoning Board of Adjustment in order to be considered complete. It is understood that this application will not be considered filed and scheduled for hearing by the Board until all required information has been received, and do further understand that the Town of Hillsborough reserves the right to postpone this request until such time as the requirements are met.

Furthermore, I understand that I, my representative as stated on the application, or my attorney should appear at the public hearing. If photographs, documents, maps or other materials are provided to the Board as evidence at the public hearing, said evidence will become property of the Town of Hillsborough and will remain on file with the Town for future reference. By law those instruments automatically become part of the public records and cannot be returned.

Also, I recognize and understand that the public hearing before the Board regarding land development is considered quasi-judicial in nature. State and local law strictly prohibits applicants and/or interested parties from participating in ex-parte communications with Board members in person, by phone, e-mail, or in writing before the application is discussed at a public hearing.

The undersigned acknowledge that the Board may require additional information and a site visit to the subject property in order to adequately determine compliance with ordinances and regulations, and to better assess impacts that may be generated by the project/proposal.

It is understood that the Applicant is fully responsible for researching and knowing any and all laws, which may be applicable and affect the outcome of the Board's decision on this application request. The Town of Hillsborough assumes no responsibility or liability relating to your failure to research and know all applicable laws including, but not limited to, state, federal and local laws, codes, land development regulations and comprehensive plan.

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Property Owner Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Property Owner Signature**

\_\_\_\_\_  
**Date**

**Property Owner Letter of Authorization Attached**       **Yes**       **No**  
[Not required for Rehearing Request from those other than original applicant]

**RETURN APPLICATION TO:**

Office of Community Planning  
27 School Street, PO Box 7  
Hillsborough, NH 03244

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Application Questions may be directed to:

Robyn L. Payson, Planning Director  
Phone: 603-464-3877, ext. 227  
Email: [robyn@hillsboroughnh.net](mailto:robyn@hillsboroughnh.net)