

SPECIAL EXCEPTION APPLICATION
Danville, NH Zoning Board of Adjustment

TOWN USE ONLY
Case No. _____
Date Filed _____

(signed – town agent)

Name of Applicant _____

Address _____

Phone Number _____

If Property owner is different than applicant:

Owner Name _____

Owner Address _____

Phone Number _____

Applicant _____ Date _____
(signature)

Tax Map and Lot number of Property: _____

*For Accessory Dwelling Unit (ADU) applications:

Town Building Inspector signature on plans: yes no

Square footage of proposed ADU per building inspector: _____

Signature indicates the inspector has reviewed the plans and certifies the square footage.

NOTE: This application is not acceptable unless all required statements are complete. Additional information may be supplied on a separate paper if the space provided is inadequate.

Fees: The following fees shall apply to all applications to the Zoning Board of Adjustment and shall be due upon submission of the application.

Application Fee		\$150.00
Mailing Fee	\$6.00 x _____ (number of abutters) =	\$ _____
	Total due:	\$ _____

Date Paid: _____ Amount Paid: _____

Cash Check Check # _____

REQUEST FOR A SPECIAL EXCEPTION as specified in the Danville Zoning Ordinance article _____ section _____

Explain how the proposal meets the special exception criteria (6 for a customary home occupation and 9 for an accessory dwelling unit):

Criteria 1 - _____

Criteria 2 - _____

Criteria 3 - _____

Criteria 4 - _____

Criteria 5 - _____

Criteria 6 - _____

Criteria 7 - _____

Criteria 8 - _____

Criteria 9 - _____

Attach separate paper as necessary

Abutter's List

Note: according to RSA 676:4(b), the names and current mailing addresses of all current abutters must be those indicated in the Town of Danville records not more than fifteen (15) days before the day of filing this application.

1. Map-Lot No. _____
Name _____
Address _____

11. Map-Lot No. _____
Name _____
Address _____

2. Map-Lot No. _____
Name _____
Address _____

12. Map-Lot No. _____
Name _____
Address _____

3. Map-Lot No. _____
Name _____
Address _____

13. Map-Lot No. _____
Name _____
Address _____

4. Map-Lot No. _____
Name _____
Address _____

14. Map-Lot No. _____
Name _____
Address _____

5. Map-Lot No. _____
Name _____
Address _____

15. Map-Lot No. _____
Name _____
Address _____

6. Map-Lot No. _____
Name _____
Address _____

16. Map-Lot No. _____
Name _____
Address _____

7. Map-Lot No. _____
Name _____
Address _____

17. Map-Lot No. _____
Name _____
Address _____

8. Map-Lot No. _____
Name _____
Address _____

18. Map-Lot No. _____
Name _____
Address _____

9. Map-Lot No. _____
Name _____
Address _____

19. Map-Lot No. _____
Name _____
Address _____

10. Map-Lot No. _____
Name _____
Address _____

20. Map-Lot No. _____
Name _____
Address _____

Applicant's signature—certifies an accurate list of abutters was obtained and submitted with the application.