

Newton NH Zoning Board of Adjustment

REQUEST FOR REHEARING

DO NOT WRITE IN THIS SPACE.

Fees Paid \$ _____

Certified Plot Plans _____

Map #	Block #	Lot#
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Applicant _____

Address _____

Owner _____

Location of Property _____
(street address)

NOTE: This application is not acceptable unless all required statements have been made, plot plans supplied, and all fees paid. Additional information may be supplied on a separate sheet if the space provided is inadequate.

Appeal for Rehearing

Relating to the rehearing of a decision of the Newton Board of Appeals.

Decision of the Newton Board of Appeals to be reviewed _____

date of original hearing _____ of section appealed _____ of the zoning ordinance.

Reason(s) for rehearing

Additional sheets may be attached

Applicant _____ Date _____

(Signature)

Owner _____ Date _____

(Signature)

Adopted 5/10/2021