

**TOWN OF LINCOLN
ZONING BOARD OF APPEALS**

**Application
for
Renewal of Special Permit for Accessory Apartment
Under Section 14.3 of the Zoning By-Law**

<i>For Town Use:</i>	Fee Paid:	Reviewed by Board Staff:	Received by Town Clerk:
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All Applications are to be submitted to Board Staff.

Applications will not be considered duly filed until all required information, submittals and payments have been provided by the Applicant, reviewed by Board Staff and filed with the Town Clerk.

1. Property

Address: _____
No. _____ Street _____

Assessor's Records: _____
Map _____ Block _____ Lot _____

2. Applicant

Name(s): _____

Contact Information: Address: _____
Phone: _____ Fax: _____ Email: _____

3. Accessory Apartment

Mailing Address: _____
No. _____ Street _____

4. Certifications of Compliance

The undersigned Applicant hereby certifies, represents and states as follows:

Not Abandoned: The Applicant has not abandoned use of the accessory apartment.

By-Law Conditions: Each of the general requirements and conditions contained in Section 14.3.2 of the Zoning By-Law (subsections (a) through (h)) continue to be complied with and satisfied by the Applicant, with the following updates, exceptions or nonconformities:

(if left blank, Applicant is certifying that there are no updates, exceptions or nonconformities)

Special Conditions: Each of the special requirements and conditions, if any, contained in the Special Permit issued for the Property, or in any prior extensions or renewals thereof, are and continue to be complied with and satisfied by the Applicant, with the following updates, exceptions or nonconformities:

(if left blank, Applicant is certifying that there are no updates, exceptions or nonconformities)

Ownership: There has been no change of ownership of the Property since the Special Permit, or the most recent extension or renewal thereof, except as follows:

(if left blank, Applicant is certifying that there has been no change of ownership)

5. Hearing Request

I/We hereby request a hearing before the Lincoln Zoning Board of Appeals for the indicated relief.

I/We certify that I/we have read and examined this Application and all the materials submitted, that all of the information contained therein or provided therewith is true and correct.

APPLICANT(S):

Signed: _____

Signed: _____ Date: _____, _____

The contents of this Application are intended to assist the Applicant in applying for zoning relief from the Zoning Board of Appeals. They are not intended to replace or override the provisions of Chapter 40A of the Massachusetts General Laws or the By-Law, or to replace sound legal advice. If there is any inconsistency between this Application and MGL Chapter 40A or the By-Law, the provisions of the By-Law and Chapter 40A control.

It is the Applicant's responsibility to assure that all legal requirements are satisfied and all showings are made. The Applicant is encouraged to review the By-Law in its entirety, and to consult with counsel and obtain its own legal advice regarding the Application.

The Board will be notifying all neighbors and abutters of the Property of this Application, and it is recommended that the Applicant discuss any issues with neighbors and abutters prior to the Hearing.

Application Checklist:

Please submit a completed and signed Application, together with:

- _____ Application Fee \$150.00
- _____ Copy of the Special Permit Decision, previously issued
- _____ Copies of any previous Renewals
- _____ Other materials submitted:
- _____
- _____
- _____

Please note that other or additional submittals may be required by the Board in connection with their review and consideration of the Application.