

**TOWN OF ALFRED
ZONING BOARD OF APPEALS**

APPLICATION FOR AN ADMINISTRATIVE APPEAL

A General Information

1. Name of Appellant: _____
2. Mailing Address: _____
3. City or Town: _____
4. Telephone: _____
5. Name of Property Owner (if different from applicant): _____
6. Location of property for which appeal is requested (street/road address):

7. Zoning district in which property is located: _____
8. Tax map and lot number of subject property: Map-# _____, Lot-# _____

An Administrative Appeal is Relief from the decision, or lack of decision, of the Code Enforcement Officer or Planning Board in regard to an application for a permit. The undersigned believes that (check one):

- An error was made in the denial of the permit.
- The denial of the permit was based on a misinterpretation of the ordinance.
- There has been a failure to approve or deny the permit within a reasonable period of time.
- Other; _____

Please explain in more detail the facts surrounding this appeal, what you think is wrong about the decision which you are appealing, and what action you want the board of appeals to take in this matter. You should be as specific as possible. (please attach a separate piece of paper to this application).

I certify that the information contained in this application is true to the best of my knowledge and belief.

Date: _____
Signature of Appellant _____

The applicant is asked to submit 8 copies of the application and all papers submitted.
Application fee : \$100.00