Application for Special Permit, Variance and Appeal of an Order/Decision

Please complete the application for a Special Permit, Variance or Appeal of an Order/Decision. Indicate the Map and Parcel Number of the property (if unknown contact the Assessor’s Office at 978-369-0392) as well as the section(s) of the Zoning Bylaw needing relief (if unknown contact the Building Commissioner at 978-369-6689).

The application fee is $150 and the abutters’ list fee is $50.

You may pay by cash or check and you may pay both fees on one check.

The Zoning Board of Appeals will send information to you and all abutters within 300 feet a describing the request as well as the meeting date and time. The Board of Appeals will also advertise the public hearing twice in a local newspaper of record according to MGL Chapter 40A Section 11.

Hearings are generally heard on the first Monday of each month. Please check the actual Hearing Schedule on the Town of Carlisle website www.carlislema.gov/zba. The application deadline is also listed on the Hearing Schedule.

Applications are to be delivered to the Town Clerk at 66 Westford Street, Carlisle, MA 01741.

If you have questions regarding the application process, please contact the Zoning Board of Appeals at 978-369-5346 or zba@carlisle.mec.edu. You may also contact the Town Clerk at 978-369-6155 or chinton@carlisle.mec.edu.
TOWN OF CARLISLE
BOARD OF APPEALS
66 Westford Street
Carlisle, MA 01741
978-369-5326
Application for a Hearing
http://carlislema.virtualtownhall.net
**All items must be filled in or application will not be accepted**

Name of Applicant: ___________________________ Phone: ______________ Email: ______________

Mailing Address: _______________________________________________________________

If different from applicant:
Name of Property Owner: ___________________________ Phone: ___________________________

Mailing Address: _______________________________________________________________

Location of Subject Property: (Street & No.) ___________________________________________
Zoning District Assessors Map & Parcel: ___________________________________________

Applicant is: (Owner, Tenant, Buyer, Agent, etc.) ___________________________
Section of Zoning Bylaw that relief is requested from: ____________________________

Must have the exact section and bylaw for your request.

Requested relief: (circle) Variance Special Permit Appeal of an Order/Decision

To Allow: (Please explain, in detail, exactly what you would like to do to the property,
i.e., "building an addition 15 feet from the sideline where 20 feet is required." If necessary, please
attach further detail on a separate sheet.) Please include property plot plan and proposed property
plans with this application.

______________________________________________________________________________

State the name of any person or attorney who is authorized by you to appear and represent you before
the board other than yourself: _______________________________________________________ 

I hereby request a hearing before the Board of Appeals on the above application.

______________________________________________________________________________ Date:

*Signature of Applicant or appointed representative

Received by Town Clerk on _______________ Signature: _____________________________

Please check if applicant is in good standing (all fees and town taxes are due)

Application Payment: $ _______________ Cash/Check/Other Ref # _______________

Abutters' List Fee Payment: $ _______________ Cash/Check/Other Ref # ________________ To Assessor:

Board of Appeals use only:
Date: ____________________ Hearing: ____________________ Decision to Clerk: ____________________

Decision Mailed to Applicant: ____________________