



TOWN OF TOLLAND
MASSACHUSETTS 01034

Date Received: _____ For office use only,
Town Clerk's Office: _____ Appeal # _____
Hearing Date: _____
Decision Date: _____

The undersigned hereby applies to the Zoning Board of Appeals for a Comprehensive Permit pursuant to MGL Chapter 40B, Sections 20-23 and 760 CMR 30.00 & 31.00:

Applicant Name: _____ Phone: _____

Applicant Address: _____ Fax: _____

Applicant Status: (check one) Public Agency Non-Profit Organization Limited Dividend Corporation

Attachment A - Attach Documentation of Applicant Status

Subsidizing Agency: _____

Subsidy Program: _____

Attachment B - Attach Agency Commitment Letter

Property Location: _____

Property Owner: _____ Phone: _____

Address of Owner: _____

Attachment C - Attach Documentation of Applicant's Interest or Ownership in property¹

Assessor's Map/Parcel Number: _____ Zoning District: _____

Number of years owned: _____ Groundwater Overlay District: _____

Attachment D - Attach Property Location Map with 300 - Foot Abutter Ring

Existing Level of Development of the Property - Number of Buildings. (if applicable) _____

Present Use(s): _____ Gross Floor Area: _____ sq. ft.

Attachment E - Existing Conditions Property Survey

¹ Applicant's interest if owned - attached copy of recorded deed(s), if under contract attached copy of all Purchase & Sales Agreement

Name of Proposed Development: _____

Short Project Description: **2** _____

Attachment F - Project Description / Narrative

Attachment G - Project Site Plan and Architectural Plan(s)

Attachment H - Project Financial Proforma

Attachment I - List of all public agencies, boards and Commissions who's review and approval would normally be required of the project and for which the applicant is seeking variance, waivers and approval from the Zoning Board of Appeals in accordance with MGL Chapter 40B

Attachment J - List of all Sections of the Zoning Ordinance that applicant seeks variances from the Zoning Board of Appeals in accordance with MGL Chapter 40B

Development Team

Applicant's Attorney: _____ Phone: _____

Address: _____ Fax: _____

Applicant's Engineer: _____ Phone: _____

Address: _____ Fax: _____

Applicant's Architect: _____ Phone: _____

Address: _____ Fax: _____

Attachment K - Developers Profile - Narrative of Developer's experience and qualification to successfully complete project

Signature: _____ Date: _____

Applicant's or Representative's Signature

Representative's Address: _____ Phone: _____

Fax: _____

2 Note - Project Description should include total number of units, type of units, number of bedrooms, building area, acreage, number of affordable units and other information applicable. This description will be used in drafting the public notices.

**Town of Tolland
Zoning Board of Appeals**

Agreement to Extend Time Limits for Holding of a Public Hearing on a Comprehensive Permit

In the Matter of _____, the Applicant(s), and the Zoning Board of Appeals, pursuant to M.G.L., Chapter 40B, Section 21 agree to extend the required time limits for holding of a public hearing on this application for a Comprehensive Permit for a period of 90 days beyond that date the hearing was required to be held.

In executing this Agreement, the Applicant(s) hereto specifically waive any claim for a constructive grant of relief based upon time limits applicable prior to the execution of this Agreement.

Applicant:

Zoning Board:

Signature: _____
Applicant or Applicant's Representative

Signature: _____
Chairman or Acting Chairman

Print: _____

Print: _____

Date: _____

Date: _____

Address of Petitioner(s) or Petitioner's Representative

Tolland Zoning Board of Appeals
Town of Tolland Town Hall
241 West Granville Road
Tolland, Ma 01034
413-258-4794

Note: Only one (1) original copy is required of this form