TOWN OF SUGAR HILL APPLICATION FOR A ZONING PERMIT

To the Board of Selectmen:

The undersigned hereby applies amended.	s for a Zoning Permit as requ	ired by Section 1701.1 of	the Sugar Hill Zoning Ordinance, a
Name of Applicant:			
Name of Property Owner:			
Street Address of Property:			
Zoning Map Location: Map: _		Lot:	
Contractor's Name and Addres	s:		
Please make a drawing on the b placement on the lot showing so	-	e and dimensions of the pr	roposed (or existing) building and it
Please provide the following:	Lot Size:	Heig	ght of Building:
Building Setbacks:	To Centerline of Road:	То І	Left Lot Line:
	To Right Lot Line:	То Б	Rear Lot Line:
lodgers or other occupants each	building is designed to acco	mmodate.	
Signature of Applicant:			
	(For Selectm	nen's use only)	
Permit Granted: Permit	Number:	Date	::
If denied please make an applic	ation to the Board of Adjustr	ments for a special except	ion or variance.

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