

Phone: 508-321-4890 | zoning@medwayma.gov https://medwayma.gov/zoning-board-of-appeals/

NOTE: THE APPLICATION WILL NOT BE CONSIDERED "COMPLETE" UNLESS ALL NECESSARY DOCUMENTS, FEES, & WAIVER REQUESTS ARE SUBMITTED. A GENERAL APPLICATION FORM MUST BE COMPLETED FOR ALL APPLICATIONS.

TO BE COMPLETED BY THE APPLICANT

Please attach any decision or denial for which you are requesting an appeal.

Please attach any and all materials submitted to the Town Board or Official with respect to the decision or denial you are appealing.

Date of Decision and/or Denial:	Application Request(s):	
Board or Official who made Decision and/or Denial:	Reversal of Decision and/or Denial	
Applicant(s):	Modification to the Decision	
	Direct Issuance of a Permit	
	Direct the Enforcement of a Section of the Zoning Bylaw	
Evidence to support grant of appeal (use attachments	if necessary):	
How are you aggrieved by the decision or denial?		
ignature of Applicant/Petitioner or Representative		Date