

## City of Holyoke

## **Board of Appeals**

## **APPLICATION**

Petition #		Date
Fee: \$200 (Paid in full at the time t	the Application is made; N	Non-Refundable)
Name of Applicant or Appellant:		
Name of Applicant or Appellant: _ Name of Property Owner (If Differ	rent than Applicant):	
Mailing Address:	Tele	phone:
Property Location:		
Zoning District:	Map-Block-Parcel #	
Registry of Deeds Title Reference: Certificate of Title #:	Book, Page _ Land Court #:	or- Plan #:
Has there been a previous VARIA	NCE issued for the premis	ses? Yes, No
If Yes, When?, For wh	nat?	
What section of the Zoning Ordin  Nature of Application, Petition, or		
Are all taxes and municipal charge (If Yes, all must be paid prior to A		perty? Yes, No
Please Note: This petition	is not complete until all in	formation is provided.
*Accuracy of the inform	mation is the responsibility	y of the Petitioner.
Signature of the Applicant or Ager	nt for the Owner	Date
		Adopted By the Board of Appeals 05/28/20