



# Town of Truro Zoning Board of Appeals

P.O. Box 2030, Truro, MA 02666

## PROCEDURE FOR SUBMITTING APPLICATION FOR HEARING

The following information and requirements must be filed with all Applications for Hearing consistent with the Rules, Regulations, Fee Schedule, and Meeting Schedule of the Truro Zoning Board of Appeals.

**Note:** Submittals must be collated into ten (10) packets and shall also be submitted **electronically** to the Planning Department Assistant at [esturdy@truro-ma.gov](mailto:esturdy@truro-ma.gov) in its entirety (all plans and attachments).

☐ **Section 1 – Application Form – Original and Nine (9) Copies**

Every application for action by the Board shall be made on an official form, which can be found on the ZBA webpage under “Forms”. Only a **completed** application form submitted with **all** required documents will be processed for hearing before the Board.

☐ **Section 2 – Denial from Building Commissioner – Filing Period – Ten (10) Copies**

Any appeal under M.G.L. Ch. 40A, §8, shall be taken within thirty (30) days from the date of the order or decision being appealed. A copy of said order or decision shall be filed with the required application form in Section 1 above.

☐ **Section 3 – Required Plan(s) – Ten (10) Copies**

Every application and petition to the Board shall be accompanied by a Site Plan and other relevant plans (e.g., elevations, floor plan) stamped by a professional engineer or architect as appropriate, drawn at a scale of no smaller than 1” = 20’ and of a size at least 11” x 17”, providing the following information:

- Narrative/description of project;
- Zoning Table indicating required dimensions, existing dimensions, and proposed dimensions;
- North arrow;
- Locus map;
- Names of streets;
- Zoning district in which the property lies;
- Names of owners of abutters, including owners of land directly opposite on any adjacent public or private way;
- Boundaries of the property, including lengths and distances;
- Location of all existing and proposed buildings, and additions, including dimensions and setbacks to all property lines;
- Existing and any proposed new curb cuts;
- Entrances, exits, driveways, and walkways, including existing or proposed required parking and existing and proposed distances to property lines;
- Easements;

Floor and elevation plan shall be drawn to scale and include gross floor area, grade, and how grade was calculated.

☐ **Section 4 – Filing Fee**

All applications shall be accompanied by a check payable to the Town of Truro. For Special Permit Applications pursuant to §40.3 (Conversion of Cottage or Cabin Colony, Motor Court, Motel or Hotel), the fee is **\$50.00 per unit**. For all other applications, the fee is **\$200.00**. All fees are non-refundable.

☐ **Section 5 – Certified Abutters List – Original and Nine (9) Copies**

A Certified Abutters List shall be filed along with the items outlined in Sections 1 – 4 above. A copy of the “Request for Certified Abutters List” is included in this packet for your convenience.

☐ **Section 6 – §40.3 Conversion of Cottage or Cabin Colony, Motor Court, Motel or Hotel – Original and Nine (9) Copies and a copy of your deed for the property [required]**

**Note:** *Please familiarize yourself with Truro Zoning Bylaws including bylaws specifically addressing property in your Truro Zoning District. It may also be helpful to review other potentially applicable Town regulations such as Board of Health and Conservation Commission regulations and regulations of other jurisdictions as applicable such as The Cape Cod National Seashore or a homeowner’s association.*

**ONCE AN APPLICATION HAS BEEN RECEIVED**

- Planning Department will determine if an application is complete. Upon determination an Application is complete, the Planning Department Assistant will notify the applicant of the next Zoning Board of Appeals meeting date and will proceed to post notice of a public hearing in accordance with Section 11 of Chapter 40A of the General Laws of Massachusetts and notify abutters.
- Either you or your agent/representative shall appear before the Board at the scheduled hearing. If you need to reschedule, you must submit a request in writing for a continuance.
- Supplemental material, *electronic and paper*, for a hearing shall be received no later than **Noon Monday** of the **prior** week (*see ZBA Meeting Schedule on ZBA webpage*). Late submittals will not be reviewed at that meeting and may result in a continuance of the hearing. Additional information for a scheduled public hearing may be submitted provided it is received within the timeframe above so that it can be included in the packet for Board Members to read and review. Submit ten (10) paper copies, including full-size plans, to the Town Clerk for filing **AND** an electronic copy to the Planning Department Assistant at [esturdy@truro-ma.gov](mailto:esturdy@truro-ma.gov).

**Please do not include a copy of these instructions with the application**



# Town of Truro Zoning Board of Appeals

P.O. Box 2030, Truro, MA 02666

## APPLICATION FOR HEARING

To the Town Clerk of the Town of Truro, MA

Date \_\_\_\_\_

The undersigned hereby files with specific grounds for this application: (check all that apply)

### GENERAL INFORMATION

☐ **NOTICE OF APPEAL**

☐ Applicant is aggrieved by his/her inability to obtain a permit or enforcement action from the Building Commissioner on (date) \_\_\_\_\_.

☐ Applicant is aggrieved by order or decision of the Building Commissioner on (date) \_\_\_\_\_ which he/she believes to be a violation of the Truro Zoning Bylaw or the *Massachusetts Zoning Act*.

☐ **PETITION FOR VARIANCE** – Applicant requests a variance from the terms § \_\_\_\_\_ of the Truro Zoning Bylaw concerning (describe) \_\_\_\_\_

☐ **APPLICATION FOR SPECIAL PERMIT**

☐ Applicant seeks approval and authorization of uses under § \_\_\_\_\_ of the Truro Zoning Bylaw concerning (describe) \_\_\_\_\_

☐ Applicant seeks approval for a continuation, change, or extension of a nonconforming structure or use under § \_\_\_\_\_ of the Truro Zoning Bylaw and M.G.L. Ch. 40A, §6 concerning (describe) \_\_\_\_\_

Property Address \_\_\_\_\_ Map(s) and Parcel(s) \_\_\_\_\_

Registry of Deeds title reference: Book \_\_\_\_\_, Page \_\_\_\_\_, or Certificate of Title Number \_\_\_\_\_ and Land Ct. Lot # \_\_\_\_\_ and Plan # \_\_\_\_\_

Applicant's Name \_\_\_\_\_

Applicant's Legal Mailing Address \_\_\_\_\_

Applicant's Phone(s), Fax and Email \_\_\_\_\_

Applicant is one of the following: (please check appropriate box)

\*Written Permission of the owner is required for submittal of this application.

☐ Owner ☐ Prospective Buyer\* ☐ Other\*

Owner's Name and Address \_\_\_\_\_

Representative's Name and Address \_\_\_\_\_

Representative's Phone(s), Fax and Email \_\_\_\_\_

- The applicant is **advised** to consult with the Building Commissioner, Planning Department, Conservation Department, Health Department, and/or Historic Commission, as applicable, prior to submitting this application.

### Signature(s)

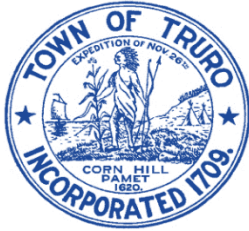
Applicant(s)/Representative Printed Name(s)

Owner(s) Printed Name(s) or written permission

Applicant(s)/Representative Signature

Owner(s) Signature or written permission

Your signature on this application authorizes the Members of the Zoning Board of Appeals and town staff to visit and enter upon the subject property



# TOWN OF TRURO

## Assessors Office Certified Abutters List Request Form

DATE: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

NAME OF AGENT (if any): \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CONTACT: HOME/CELL \_\_\_\_\_ EMAIL \_\_\_\_\_

PROPERTY LOCATION: \_\_\_\_\_  
(street address)

PROPERTY IDENTIFICATION NUMBER: MAP \_\_\_\_\_ PARCEL \_\_\_\_\_ EXT. \_\_\_\_\_  
(if condominium)

### ABUTTERS LIST NEEDED FOR:

**FEE: \$15.00 per checked item**

(please check all applicable)

(Fee must accompany the application unless other arrangements are made)

<input type="checkbox"/> Board of Health <sup>5</sup>	<input type="checkbox"/> Planning Board (PB)	<input type="checkbox"/> Zoning Board of Appeals (ZBA)
<input type="checkbox"/> Cape Cod Commission	<input type="checkbox"/> Special Permit <sup>1</sup>	<input type="checkbox"/> Special Permit <sup>1</sup>
<input type="checkbox"/> Conservation Commission <sup>4</sup>	<input type="checkbox"/> Site Plan <sup>2</sup>	<input type="checkbox"/> Variance <sup>1</sup>
<input type="checkbox"/> Licensing	<input type="checkbox"/> Preliminary Subdivision <sup>3</sup>	
Type: _____	<input type="checkbox"/> Definitive Subdivision <sup>3</sup>	
<input type="checkbox"/> Other _____	(Fee: Inquire with Assessors)	

(Please Specify)

**Note: Per M.G.L., processing may take up to 10 calendar days. Please plan accordingly.**

### THIS SECTION FOR ASSESSORS OFFICE USE ONLY

Date request received by Assessors: \_\_\_\_\_ Date completed: \_\_\_\_\_

List completed by: \_\_\_\_\_ Date paid: \_\_\_\_\_ Cash/Check \_\_\_\_\_

<sup>1</sup>Abutters, owners of land directly opposite on any public or private street or way, and abutters to the abutters within 300 feet of the property line.

<sup>2</sup>Abutters to the subject property, abutters to the abutters, and owners of properties across the street from the subject property.

<sup>3</sup>Landowners immediately bordering the proposed subdivision, landowners immediately bordering the immediate abutters, and landowners located across the streets and ways bordering the proposed subdivision. Note: For Definitive Subdivision only, responsibility of applicant to notify abutters and produce evidence as required.

<sup>4</sup>All abutters within 300 feet of parcel, except Beach Point between Knowles Heights Road and Provincetown border, in which case it is all abutters within 100 feet. Note: Responsibility of applicant to notify abutters and produce evidence as required.

<sup>5</sup>Abutters sharing any boundary or corner in any direction – including land across a street, river or stream. Note: Responsibility of applicant to notify abutters and produce evidence as required.