

**TOWN OF SMITHFIELD BOARD OF APPEALS**

**Application Fee \$100.00**

**APPLICATION FOR HARDSHIP VARIANCE**

1. Name of Applicant: \_\_\_\_\_.
2. Mailing Address: \_\_\_\_\_.
3. City or Town: State: \_\_\_\_\_.
4. Telephone: \_\_\_\_\_.
5. Name of Property Owner (if different from applicant): \_\_\_\_\_.
6. Location of property for which variance is requested (street/road address): \_\_\_\_\_.
7. Zoning district in which property is located: \_\_\_\_\_.
8. Tax map and lot number of subject property: Map \_\_\_\_\_, Lot \_\_\_\_\_.
9. The applicant has the following legal interest in the subject property (deed, purchase and sale agreement, lease, option agreement or other – circle appropriate one and attach copy).

**Reasons/Supporting Information for Variance.**

1. The applicant proposes the following building, structure, use or activity on the subject property: \_\_\_\_\_.
2. The applicant seeks a variance(s) from the following dimensional standard(s): \_\_\_\_\_ which is/are contained in section(s) \_\_\_\_\_ of the Zoning Ordinance.
3. The lot is currently being used for the following:  
\_\_\_\_\_
4. The conditions and character of the neighborhood are:  
\_\_\_\_\_

The applicant requests the following type of variance Undue Hardship Variance

(30-A M.R.S.A. § 4353(4))

1. **Undue Hardship Dimensional Variance.** The Board of Appeals may grant a variance only when strict application of the ordinance to the petitioner and the petitioner's property would cause undue hardship, which means that the application meets each of the criteria listed below.

**Please explain why you believe that the subject property meets each of the following criteria for this type of variance: Please use additional paper if needed!!!**

- a. The land in question cannot yield a reasonable return unless a variance is granted:\_\_\_\_\_

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- b. The need for a variance is due to the unique circumstances of the property and not to the general conditions in the neighborhood:\_\_\_\_\_

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- c. The granting of a variance will not alter the essential character of the locality:\_\_\_\_\_

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- d. The hardship is not the result of action taken by the applicant or a prior owner:

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**Additional Information**

In addition to the information provided above, please submit a sketch plan of the property showing dimensions and shape of the lot, the size and locations of existing buildings, the locations and dimensions of proposed buildings, additions and alterations, the locations of roads and driveways, the location of any water body adjacent to the property, and any natural and topographic peculiarities of the lot in question.

**Signature of Applicant**

To the best of my knowledge, all information submitted on and with this application is true and correct.

Date: \_\_\_\_\_.

By: \_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name)

**Note to Appellant:** this form should be returned to the Town Office located at 926 Village Road, Smithfield in person. The Administrative Assistant will contact the Chairman of the Board of Appeals and you will be notified of the date of the hearing on your appeal within thirty (30) days of receipt of COMPLETED application.