APPLICATION FOR AN EQUITABLE WAIVER OF DIMENSIONAL REQUIREMENTS

	Do not write in this space.
To: Board of Adjustment,	Case No.
Town of Canaan	Date Filed
Town of Canaan	(signed – Board of Adjustment)
Name of Applicant	_
Address	
Owner	
(if same as applicant Location of Property	
(street, number, sub-divi	ision and lot number)
NOTE: This application is not acceptable unless all req	uired statements have been made.
Additional information may be supplied on a separate shee	et if the space provided is inadequate.
An Equitable Waiver of Dimensional Requirements is reque of the ordinance t	to permit
Does the request involve a dimensional requirement, not a () yes	a use restriction?
Explain how the violation has existed for 10 years or mor including written notice, being commenced by the tow	
- or - Explain how the nonconformity was discovered after the str after a vacant lot in violation had been transferred to a bona	* -

- and -

How the violation was not an outcome of ignorance of the law or bad faith but resulted from a good faith error in measurement or calculation.	
3. Explain how the nonconformity does not consinterfere with future uses of other property in	
,	
4. Explain how the cost of correction far outweigh	hs any public benefit to be gained
Applicant	Date

(signature)