



**TOWN OF PHILLIPSTON**

Zoning Board of Appeals  
50 The Common  
Phillipston, MA 01331  
Phone: 978-249-6828  
Fax: 978-249-3356  
[selectman@phillipston-ma.gov](mailto:selectman@phillipston-ma.gov)

Time: \_\_\_\_\_

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

Town Clerk \_\_\_\_\_

Application #: \_\_\_\_\_

**Application for Zoning Board of Appeals Hearing**

- Special Permit
- Variance
- Administrative Appeal

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Location of Property for Hearing: \_\_\_\_\_

Applicant is:

- Owner
- Authorized Agent
- Licensee
- Prospective Purchaser

Nature of Appeal (Please be specific, attach another sheet if necessary)

---

---

I hereby request a hearing before the Zoning Board of Appeals with reference to the above noted application.

Signed: \_\_\_\_\_

Title: \_\_\_\_\_

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

Received from application the sum of \$\_\_\_\_\_ to be applied to the cost of the appeals process.

**Please return to the Building Department with the decision of the Zoning Board and application for the building permit.**