



Application #: \_\_\_\_\_  
Fees Paid: \_\_\_\_\_  
Check #: \_\_\_\_\_  
Receipt #: \_\_\_\_\_

**ZONING BOARD OF ADJUSTMENT  
MOTION FOR REHEARING**

Name of Applicant: \_\_\_\_\_

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

Owner (If same as applicant, write "same"): \_\_\_\_\_

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

Tax Map/ Lot # (s): \_\_\_\_\_ Zoning District (s): \_\_\_\_\_

Street Address: \_\_\_\_\_

**OWNER AUTHORIZATIONS & STATEMENTS OF ASSURANCE:**

I hereby make application to the City of Laconia for the above-referenced property (ies) and the development as described. To the best of my knowledge the information provided herein is accurate and is in accordance with the Zoning Ordinance and land use regulations of the City, except where waivers are requested. The City of Laconia Zoning Board and/or city employees are authorized to enter the property (ies) for purposes of reviewing this proposal and for inspecting improvements as a result of an approval of this proposal. I understand that I am responsible for appearing, or having someone appear on my behalf, at any and all meetings before the Zoning Board.

Sign as appropriate (If agent or non-person please attach certification)

NOTE: Please attach an Applicant Contact Worksheet

PROPERTY OWNER(S)

AGENT(S)

\_\_\_\_\_  
Printed Name Here

\_\_\_\_\_  
Printed Name Here

\_\_\_\_\_  
Signature of Property Owner(s)

\_\_\_\_\_  
Signature of Agent(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Rehearing Request for Application #: \_\_\_\_\_

As provided for by RSA 677:2, any party to the action or any person directly affected thereby may move for a rehearing in respect to any matter determined in the decision and must specify such grounds in the motion for rehearing. The Zoning Board of Adjustment may grant a rehearing if, in the opinion of the Board, there is sufficient reason presented in the applicant's motion for rehearing.

**SUBMIT RESPONSE IN ACCORDANCE ARTICLE XI SECTION 235-69 C (7) AND RSA 677:2**

DUE AT SUBMISSION:

**1 COPY OF ENTIRE ZONING BOARD APPLICATION WITH REQUIRED ATTACHMENTS**