

**APPLICATION FOR CONDITIONAL USE APPROVAL
FROM PLANNING BOARD**

Name of Applicant _____

Address _____

Owner _____
(if same as applicant, write "same")

Location of Property _____
(street, number, subdivision & lot number)

Permit Application # _____ Map _____ Lot _____

NOTE: A conditional use approval is required as provided in Table 4.1 of the Lyme Zoning Ordinance. The Planning Board will review each case according to section 12.20 and any other relevant sections of the Lyme Zoning Ordinance.

BE SURE TO SIGN AND DATE THIS APPLICATION.

Type 1. APPEAL FROM AN ADMINISTRATIVE DECISION

Relating to the interpretation and enforcement of the provisions of the Zoning Ordinance.

Administrative decision to be reviewed _____

Zoning Article(s) & Section(s) in Question _____

Type 2. APPLICATION FOR A CONDITIONAL USE APPROVAL

Description of proposed use showing jurisdiction for a conditional use approval as specified in Zoning

Ordinance Article(s) & Section (s) _____

Please provide relevant information for your application such as number of employees, days and hours of operation, parking needs and availability, type of operation, type and quantity of waste or any other information which you feel is relevant for a complete review. See article IV of the zoning ordinance for specific requirements depending on the type of proposal, as well as article XII.

Applicant(s) (Print): _____	Date: _____
Signature(s): _____	