APPLICATION FOR A SPECIAL EXCEPTION

To: Stoddard Zoning Board of Adjustment	Do not write in this space Case No
1450 Route 123 North	Date Filed
Stoddard, NH 03464	(signed - ZBA)
Name of Applicant	
Address	
Owner	
(if same as application)	ant, write "same")
Location of Property	
(street, number, sub-div	vision and lot number)
NOTE: This application is not acceptable unless all	l required statements have been made.
Additional information may be supplied on a separate sheet if the space provided is inadequate.	
APPLICATION FOR A SPEC	CIAL EXCEPTION
Description of proposed use showing justification for a spe	ecial exception as specified in the
zoning ordinance, article	_ section
Explain how the proposal meets the special exception crite	ria as specified in article
section of the zoning ordinance (list all criter	-
Criteria 1	
Criteria 2 -	
Criteria 3 -	
Critorio A	
Criteria 4 -	
Applicant	Date

(signature)