## APPLICATION FOR A SPECIAL EXCEPTION

	Do not write in this space.
	Case No
	Date Filed
To: Zoning Board of Adjustment,	
City/Town of Brookfield NH	
Name of Applicant	
Address	
Owner	
	olicant, write "same")
Location of Property	
Location of Property(street, number, sub	-division and lot number)
NOTE: This application is not acceptable unless Additional information may be supplied on a se	
Application for	a Special Exception
zoning ordinance, article	on for a special exception as specified in the Brookfield section
	eption criteria as specified in article,
	he zoning ordinance (list all criteria from ordinance).
Criterion 1 -	
Criterion 2 -	
Criterion 3 -	
Criterion 4 -	
Applicant	Data
Applicant(Signature)	Date