

Town of Sangerville Zoning Ordinance

Notice of Decision

To: _____

Date: _____
Map. _____ Lot. _____

Dear: _____

This is to inform you that the (Planning Board/Board of Appeals) has acted on your application for a (permit, appeal, variance,) as follows:

Approved _____ **Denied** _____

If **approved**, the following conditions and safeguards are prescribed as authorized in Sec. 6 of the Ordinance. Any violation of these conditions shall be a violation of the Ordinance.

1. _____
2. _____
3. _____
4. _____

If **denied**, the reasons for denial are as follows:

1. _____
2. _____
3. _____
4. _____

This (permit, appeal, variance,) expires in one year.

(Planning Board/Board of Appeals) Chairman