



TOWN OF BLANDFORD

Zoning Board of Appeals

1 Russell Stage Road
Blandford, MA 01008
413.848.2332

www.townofblandford.com

Zoning Board

Donald Brainerd, Chair
Jim Kronholm
Sumner Robbins

Date: _____

Name of Applicant or Appellant: _____

Address: _____

Phone/Email: _____

Location of Property: _____

Applicant is: Owner, tenant, licensee, prospective purchaser (**circle all that apply**)

Nature of application or appeal (write in space below and/or include an attachment to this form upon submission):

Applicable section of Building, Zoning Bylaw (see Town Zoning Bylaws): _____

Date of denial by Building Inspector – Planning Board of applicable: _____

I hereby request a hearing before the Zoning Board of Appeals with reference to the above noted application or appeal.

Signed: _____

Signed: _____

Title: _____

Supporting documents and site plans to be attached if applicable.