The Commonwealth of Massachusetts

Town of Becket
Zoning Board of Appeals
557 Main Street
Becket, Massachusetts 01223
(413) 623-8934 ext. 122 fax (413) 623-6036

zba@townofbecket.org

APPLICATION FOR SPECIAL PERMIT
UNDER THE TOWN OF BECKET ZONING BYLAWS
(Revised 11/11/2019)

CLERICAL FEE: $100.00

POSTAGE: ACTUAL MAILING COST TO NOTIFY ABUTTERS AND PARTIES OF INTEREST

ADVERTISING: ACTUAL COST TO PUBLISH 2 (TWO) NOTICES OF THE PUBLIC HEARING IN THE BERKSHIRE EAGLE

(Postage and advertising amounts will be provided when they are determined.)

MAP_____ LOT_____BOOK_____PAGE_____

STREET ADDRESS_____

DATE OF APPLICATION_____

APPLICANT NAME(S) AND ADDRESS(ES)_____

_____

DAYTIME PHONE #_____ EVENING PHONE #_____

EMAIL ADDRESS_____

NAME AND ADDRESS OF OWNER IF DIFFERENT FROM APPLICANT_____

_____

I (WE) REQUEST A SPECIAL PERMIT FOR_____

_____

_____

_____*

UNDER SECTION_____ OF THE TOWN OF BECKET ZONING BYLAWS.

APPLICANT_____ CO-APPLICANT_____

*PLEASE USE AN ADDITIONAL SHEET OF PAPER IF NECESSARY AND ATTACH IT TO THIS FORM ALONG WITH ANY OTHER INFORMATION YOU THINKMAY BE HELPFUL IN PROCESSING YOUR APPLICATION. (MAPS, ETC.)