ZONING BOARD OF APPEALS

APPLICATION FOR A PUBLIC HEARING FOR A VARIANCE/SPECIAL PERMIT

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STREET & NUMBER: $_\mathcal{Z}$	691 Crawbery F	Wy' LOT: /	MAP: <u>/32</u>
ZONING DISTRICT:m			
USE REQUESTED: \mathcal{S}	AME		
OWNER OF LAND & BUI	LDING: LBM F	Nancial LLP	ГЕL.# <u>774-269-816</u> 0
ADDRESS OF OWNER: _	64 Portsideds	· POLAGEHANA	. 02559
PERSON(S) WHO WILL U			
ADDRESS: 2 Shore			MAL 02532
DATE: 3/2/20	,		Viator >
This application was received on		The Ten	
Town Clerk:	· · · · · · · · · · · · · · · · · · ·	Date:	
Tax Collector:		Date:	
Planning/Zoning Dept.:		Date:	
Application fee paid:	Check #:	Receipt:	
Advertising fee paid:			
Abutters fee paid:	Check #	Receint	•

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STREET & NUMBER: <u>24</u>	641 CCANDERY	HWYI_LOT:	N	IAP: <u>/2</u> 4	<u> </u>
ZONING DISTRICT: _MC	-30	/			
USE REQUESTED:	tm e				
OWNER OF LAND & BUIL	DING: LBM P	ENONCIAL L	LP TEL.	# <u>774-</u> 2	269-8160
ADDRESS OF OWNER:	4 Portside di	- POCAGE	HAMA. O.	1559	
PERSON(S) WHO WILL U	ILIZE PERMIT: _	Stelle Hul	chouch.	JOHN	DIFALIA
ADDRESS: 2 Shore			4/MA	1 025.	32
DATE: 3/2/20				when	<u> </u>
This application was received on t				· •	
Town Clerk:		Date:			
Tax Collector:		Date:			
Planning/Zoning Dept.:		Date:			<u> </u>
Application fee paid:	Check #:		Receipt:		
Advertising fee paid:	Check #	R	Receipt:		
Abutters fee paid:	Check #	1	Receipt:		

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STREET & NUMBER:	Y/ C.CANDERY	<u>Ηωγι</u> LOT:		MAP: \angle	24
ZONING DISTRICT: _M(_	30	/			
USE REQUESTED: <u>SAM</u>	ne				
OWNER OF LAND & BUILD	ING: <u>LBM</u>	ENONCIAL L	LP TE	L.# <u>774</u>	1-269-8160
ADDRESS OF OWNER: 54	Portoded	- POCATE	effna.	025,69	
PERSON(S) WHO WILL UTI	LIZE PERMIT: _	Steve HN	146011	1 / John	v DIFALIA
ADDRESS: 2 Shore			4/m	AL 02	532
	, SIGNATURE: _			ratio	2
This application was received on the	e date stamped here:				
Town Clerk:		Date:			
Tax Collector:		Date:			
Planning/Zoning Dept.:		Date:			
Application fee paid:	Check #:		Receipt: _		· · · · · · · · · · · · · · · · · · ·
Advertising fee paid:	Check #	F	Receipt: _		
Abutters fee paid:	Check #		Receipt: _		

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STREET & NUMBER: 2	691 CCANDEM F	<u>/Wyi</u> LOT:	MA	P: <u>/32</u>	
ZONING DISTRICT:MA	-30	,			
USE REQUESTED: <i>Sp</i>	4Me				- 4.
OWNER OF LAND & BUIL	DING: <u>LBM F</u>	Noncial L	<u>'LP_</u> TEL.#	714-269	-8160
ADDRESS OF OWNER:	14 Portsded	· POCATA	24MA.021	59	
PERSON(S) WHO WILL U	IILIZE PERMIT: _	Steve Hu	ckburt/	John DIT	AliA
ADDRESS: 2 Shore	Rd. Buzz	ACL & BA	4 MAL	02532	
DATE: 3/2/20	SIGNATURE:		1/10	tu)	·
This application was received on					
					
Town Clerk:	·	Date:			
Tax Collector:		Date:			
Planning/Zoning Dept.:		Date:			
Application fee paid:	Check #:	J	Receipt:	· · · · · · · · · · · · · · · · · · ·	
Advertising fee paid:		F	-		_
Abutters fee paid:	Check #		Receipt:		- · ·

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STREET & NUMBER: $_\mathcal{L}$	691 Cranbery F	Wyi LOT: _	MAP:	132
ZONING DISTRICT:	<u>r-30</u>	,		
USE REQUESTED: $\underline{\mathcal{S}}$	AME			
OWNER OF LAND & BUI	LDING: LBM E	Nancial LL	<u> </u>	74-269-8160
ADDRESS OF OWNER: _	84 Portsded	· POCAGE!	MA.0255	9
PERSON(S) WHO WILL U	TILIZE PERMIT: 🗻	Steve Hury	Buck IT	Ohn DIFALIA
ADDRESS: 2 Shore				2532
F	SIGNATURE:		/ Viate	<i>3</i>
This application was received on	the date stamped here:	120/4		
Town Clerk:		Date:		
Tax Collector:		Date:		
Planning/Zoning Dept.:		Date:		
Application fee paid:	Check #:	Rec	ceipt:	
Advertising fee paid:	Check #	Rec	ceipt:	
Abutters fee paid:	Check #	Re	eceipt:	

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STREET & NUMBER: 24	91 CCANDERY	<u>HWYi</u> LOT: _	MAP: <u>/32</u>
ZONING DISTRICT: _MC	-30 '	,	
USE REQUESTED:SA	Me		
OWNER OF LAND & BUILI	DING: LBM	FINANCIAL LL	P TEL.# 774-269-8160
ADDRESS OF OWNER: \mathcal{J}	"4 Portsded	r. POCAGE	MA.015,69
PERSON(S) WHO WILL UI	ILIZE PERMIT:	Steve HUC	BUCK MICHN DITALIA
ADDRESS: 2 Shore	Rd. Buz	CACLE BAY	1 / MAL 02532
DATE: 3/2/20	_SIGNATURE: _		/ Tration
This application was received on t	he date stamped here		
Town Clerk:		Date:	
Tax Collector:		Date:	
Planning/Zoning Dept.:		Date:	
Application fee paid:		Re	ceipt:
Advertising fee paid:		****	ceipt:
Abutters fee paid:	Check #	Re	eceipt:

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STREET & NUMBER: 2691 CCANDERS HWY LOT: MAP: 132 ZONING DISTRICT:	161
USE REQUESTED: SAME	161
	Mars.
OWNER OF LAND & BUILDING: LBM Financial LLP TEL.# 774-269-81	<u> </u>
ADDRESS OF OWNER: 54 Portside dr. PORASSESSMA. 02569	/ -
PERSON(S) WHO WILL UTILIZE PERMIT: 3/14/2/HUCKBUCK JOHN DIFAM	A
ADDRESS: 2 Shore Rd. BUZZACLA BAY MAL 02532	
DATE: 3/2/20 SIGNATURE:	
This application was received on the date stamped here:	
Town Clerk: Date:	
Tax Collector: Date:	
Planning/Zoning Dept.: Date:	
Application fee paid: Check #: Receipt:	
Advertising fee paid: Check # Receipt:	
Abutters fee paid: Check # Receipt:	

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ZONING DISTRICT:M	C-30 '	
USE REQUESTED: $\underline{\mathcal{S}}$	AME	
OWNER OF LAND & BUI	LDING: LBM F	Nancial LLP TEL.# 774-269-8166
ADDRESS OF OWNER:	64 Portsdeds	POCASSESSMA.015,69
PERSON(S) WHO WILL U	TILIZE PERMIT:	Steve HUMBURY STORN DITALIA
ADDRESS: 2 Shore		
DATE: 3/2/20	SIGNATURE:	Tution
This application was received on		Jan 129
Town Clerk:		Date:
Tax Collector:		Date:
Planning/Zoning Dept.:		Date:
Application fee paid:		Receipt:
Advertising fee paid:	Check #	Receipt:
Abutters fee paid:	Check #	Receipt:

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ZONING DISTRICT:M	<u>r-30</u>	,	
USE REQUESTED:	AME		
OWNER OF LAND & BUI	LDING: LBM P	Nancial LLP	TEL.# <u>774-269-8160</u>
ADDRESS OF OWNER:	54 Portsted	· POLAGELAN	A.02569
PERSON(S) WHO WILL U	TILIZE PERMIT:	Steve HUNG	Det Sohn DITALIA
ADDRESS: 2 Shore			MAL 02532
DATE: 3/2/20			Lister
This application was received or		prope	
Town Clerk:		Date:	
Tax Collector:		Date:	
Planning/Zoning Dept.:		Date:	
Application fee paid:	Check #:	Receip	pt:
Advertising fee paid:	Check #	Receip	ot:
Abutters fee paid:	Check #	Recei	pt: