



TOWN OF CHILMARK
CHILMARK, MASSACHUSETTS

THE COMMONWEALTH OF MASSACHUSETTS

TOWN OFFICES:
Beetlebung Corner
Post Office Box 119
Chilmark, MA 02535
(508) 645-2110 Fax

To The Board of Appeals, TOWN of CHILMARK

_____ 20__

The undersigned hereby petitions the Board of Appeals to issue a Special Permit under the terms of the Zoning By-laws of the Town of Chilmark:

Article _____, Section _____

at the premises owned by (Owner of Record) _____

at _____ (street address),

Assessor's parcel MAP _____ LOT _____

In the following respect or any limitation, extension, change, alteration or modification of use, or method of use as may at hearing appear as necessary or proper in the premises.

State Briefly Reasons for Special Permit

Petitioner _____

Address _____

Telephone Number _____