



**TOWN OF TOLLAND**  
**APPEAL FORM**  
Zoning Board of Appeals

App. # \_\_\_\_\_

**Property Information**

Property Address: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Zone: \_\_\_\_\_ Map/Block/Lot: \_\_\_\_\_

**Appellant Information**

Name: (if different than above) \_\_\_\_\_

Address: (if different than above) \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Description of Appeal**

Describe what action by the Zoning Enforcement Officer is being appealed and why:

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All of the above statements and the statements contained in any documents submitted herewith are true to the best of my knowledge:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This appeal is subject to public notice requirements. Appellant will be responsible for notifying abutters by certificate of mailing and posting lawn signs. Staff will provide materials to the appellant.

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**OFFICE USE ONLY**

Date Submitted: \_\_\_\_\_ Official Date of Receipt: \_\_\_\_\_  
(stamp)

Public Hearing Set for: \_\_\_\_\_

Decision Date: \_\_\_\_\_

Decision: \_\_\_\_\_