

RECEIVED
MAY 15 2023
BY: *[Signature]*

Received by the Town Clerk:

Date:

Application complete _____

Signed: _____

Application incomplete _____

APPLICATION COVER PAGE

Date: 05-10-2023

Date Received by ZBA: 5/15/23

Name of Applicant and Mailing Address: Vera Gavigo

P.O. Box 4814 - Vineyard Haven, MA 02568

Email Address: Vem@JITMV.com Telephone Number: (508) 317-1490

Name of Owner and Mailing Address (If not Applicant): _____

Map and Lot #: 29-64

Street Address of Subject Property: 105 CHARLES NECK WAY

Applicant is: OWNER (Owner, Tenant, Purchaser, Other)

Nature of Application (Special Permit, Appeal, Variance): _____

Applicable Section of Zoning Bylaw: 11.2-2 VC 4.2-2 D(3)

Date of Denial by Building Inspector, Zoning Inspector, or Planning Board (If Applicable): _____

Plot Plan: Must provide a plan by a registered surveyor showing the total property with the existing buildings, including the proposed project, all setback distances to be provided.

Plans: 2 sets of scaled drawings of floor plans that show total sq. ft. per floor (measured from exterior of wall), at least 2 elevations with one showing proposed height to ridge. If the project is an addition to existing structure please clearly identify proposed work.

Description of proposed project: Please attach a detailed narrative.

I have read the overview of the ZBA process attached to this application and completed all sections of the application cover page and therefore request a hearing before the West Tisbury Zoning Board of Appeals with reference to the above noted application.

Signed: *[Signature]*

Title(s): _____

Application fee of \$200.00 is required. Date Paid:

received
5/15/23
CK #377