



OLD VALUES - NEW HORIZONS

COMMUNITY DEVELOPMENT

PO Box 120, Windham, New Hampshire 03087
(603) 432-3806 / Fax (603) 432-7362
www.WindhamNewHampshire.com

Variance Renewal Application

Name of Applicant _____ **Date** _____

Mailing Address _____

Phone # _____ Fax # _____

Email _____

Name of Property Owner _____

Mailing Address _____

Phone # _____ Fax # _____

Email _____

Property Address _____

Map/LotNumber _____ ZoningDistrict _____



PLEASE COMPLETE THE FOLLOWING:

1. **Variance Case #:** _____

2. **Date of ZBA Approval:** _____

3. **Please provide a brief description of the progress that has been made towards exercising the approval** ("substantial progress" must be shown to permit a 1 year renewal of the variance per Section 906 of the Town of Windham Zoning Ordinance and Land Use Regulations):

I have read this application and state that, to the best of my knowledge, the information provided is true.

Applicant Signature **Date**

Owner Signature (if different from applicant) **Date**



Staff Use Only

Received by: _____

Date _____

Approved by: _____

Date _____

Code Enforcement Administrator