

# Application for Variance or Appeal to Board of Zoning Appeals Town of Porter (3/2026 REV)

Date Application Received \_\_\_\_\_

Fee Paid \_\_\_\_\_

*For Office Use Only*

Porter Town Office - 71 Main Street Porter, Maine 04068 / 207-625-8344 (phone)/207-625-4120 (fax)

The application form must be submitted with the \*\$\_\_\_\_\_ application fee made payable to: Town of Porter

*\*The application fee is to be set annually by the Select Board.*

*The appellant must meet the following definition of **Aggrieved Party**: A person whose land is directly or indirectly affected by the granting or denial of a permit, waiver, or variance under this Ordinance; a person whose land abuts land for which a permit, waiver, or variance has been granted, or a group of persons who have suffered particularized injury as a result of the granting or denial of such permit, waiver, or variance.*

Name of Appellant : \_\_\_\_\_

Name of Owner:  Check Box if address is the same as Appellant \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City or Town: \_\_\_\_\_

Phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email : \_\_\_\_\_

Parcel applied for Appeal or Variance: TAX MAP \_\_\_\_\_, LOT \_\_\_\_\_ (Refer to Tax Maps located in the Town Office)

The undersigned requests that the Board of Appeals consider one of the following (Check Box):

**1. Administrative Appeal (Check all that apply):**

An error was made in the denial or approval of the permit

Alleged responsible Party:  CEO /  Planning Board – (check one)

The denial or approval of the permit was based on a misinterpretation of the ordinance

Alleged responsible Party:  CEO /  Planning Board – (check one)

There has been a failure to approve or deny the permit within a reasonable time

Alleged responsible Party:  CEO /  Planning Board – (check one)

Other (Please specify) \_\_\_\_\_

Alleged responsible Party:  CEO /  Planning Board – (check one)

**Note:** Please explain in more detail the facts surrounding this Application for Appeal (please attach separate documents, if necessary). You should be as specific as possible so that the Board of Appeals can give full consideration to your case. Appeals regarding the CEO are reviewed De Novo, and Appeals regarding the Planning Board are reviewed Appellate

**2. Reconsideration - Land Use Ordinance Article VII Section 7.7 Subsection I – (30-A M.R.S.A. Section 2691(3)(F))**

Type of Variance:  Variance (General)  Disability Vehicle Storage  Single Family Dwelling Setback

NOTE: Fill out the appropriate section on the following page that was marked here.

**3. A General Variance (M.R.S.A 30-A § 4353 §§ 4) (lot frontage, structure height, lot coverage, or setback requirements, ONLY)**

a.) Nature of Variance (Please provide a general description) \_\_\_\_\_

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**Note:** In addition, a sketch plan of the property must accompany this application showing dimensions and shape of the lot, the size and locations of existing buildings, the locations and dimensions of proposed buildings or alterations, and any natural or topographic peculiarities of the lot in question.

b.) Justification of Variance (In order for a variance to be granted, the appellant must demonstrate to the Board of Appeals that the strict application of the terms of the zoning ordinance would cause undue hardship. There are four (4) criteria which must be met before the Board of Appeals can find that a hardship exists. Please explain how your situation meets each of these criteria listed below, include attached documents if needed):

1.) The land in question cannot yield a reasonable return unless the variance is granted.

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2.) The need for a variance is due to the unique circumstances of the property and not to the general conditions of the neighborhood.

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3.) The granting of the variance will not alter the essential character of the locality.

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4.) The hardship is not the result of action taken by the appellant or a prior owner.

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**4. Disability Vehicle Storage (M.R.S.A 30-A § 4353 §§ 4-A(B))**

- a.) Length of non-commercial vehicle (*feet and inches*) \_\_\_\_\_
- b.) Width of non-commercial vehicle to be parked/stored (*feet and inches*) \_\_\_\_\_
- c.) Submission of proposed plans for the structure and variance request provided?  Yes  No
- d.) Submission of owner proof of permanent disability provided?  Yes  No

**5. Single-Family Dwelling Setback (M.R.S.A 30-A § 4353 §§ 4-B)**

a.) **Justification of Variance** (*In order for a variance to be granted, the appellant must demonstrate to the Board of Appeals that the strict application of the terms of the zoning ordinance would cause undue hardship. There are **five (5)** criteria which must be met before the Board of Appeals can find that a hardship exists. Please explain how your situation meets each of these criteria listed below, include attached documents if needed*):

1.) The need for a variance is due to the unique circumstances of the property and not to the general conditions if the neighborhood.

\_\_\_\_\_  
\_\_\_\_\_

2.) The granting of the variance will not alter the essential character of the locality.

\_\_\_\_\_  
\_\_\_\_\_

3.) The hardship is not the result of action taken by the appellant or a prior owner.

\_\_\_\_\_  
\_\_\_\_\_

4.) The granting of the variance will not substantially reduce or impair the use of abutting property.

\_\_\_\_\_  
\_\_\_\_\_

5.) The hardship is not the result of action taken by the appellant or a prior owner.

\_\_\_\_\_  
\_\_\_\_\_

6.) Is the single family dwelling a permanent year-round residence?  Yes  No

7.) The variance request is from a wetland or waterbody within shoreland zones?  Yes  No

8.) Written consent of affected abutting landowner(s) obtained and submitted?  Yes  No

**Additional Comments:** (*Add attached pages, as necessary*)

I certify that the information contained in this application and its supplements are true and correct.

\_\_\_\_\_(Signature of owner/applicant) \_\_\_\_\_(Date)

**Note to Appellant:** This form should be returned to the Chairman of the Board of Appeals. You will be notified of the date of the hearing on your Application of Appeal or Variance.