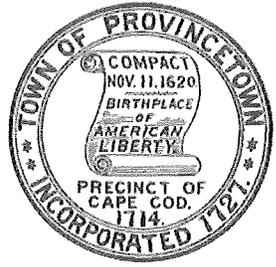


FILE# 20-43

Town of Provincetown  
**ZONING BOARD OF APPEALS**



**APPLICATION FOR A HEARING**

TO THE TOWN CLERK, PROVINCETOWN, MASSACHUSETTS: *(Complete 1, 2, 3 and 4 below; please print legibly)*

1. Property located at: 227R Commercial Street Assessors Map & Parcel 11-1-001-A Zoning District TCC

Title Reference: Deed Book 18073 Page 205 Land Court Certificate of Title \_\_\_\_\_ Plan and Lot# \_\_\_\_\_

Present use of premises: Condemned Proposed use of premises: Hotel, Restaurant, Condominium

2. Prior zoning relief granted to the property:  Special Permit  Variance  Unknown

3. The undersigned hereby files *(check ONE of the following)*:

**SPECIAL PERMIT** #2

Applicant seeks a **Special Permit** under Article(s) 2 Section(s) 2470 of the Provincetown Zoning By-law *(Please attach a descriptive narrative of the project with this application)*:

If application is being filed under Article 3, Section 3110 AND is a one or two family home, check if you wish decision to be rendered as a *Goldhirsh* decision. If box is not checked, decisions shall be rendered and processed according to standard procedure.

**PETITION FOR VARIANCE**

Applicant requests a **Variance** from the terms of the Provincetown Zoning By-law as set forth in Article(s) \_\_\_\_\_ Section (s) \_\_\_\_\_ *(Please attach a descriptive narrative of the project with this application)*.

**NOTICE OF APPEAL**

- a. Applicant is **aggrieved** by his inability to obtain enforcement action from the Building Commissioner on (date) \_\_\_\_\_.
- b. Applicant is **aggrieved** by order or decision of the Building Commissioner on (date) \_\_\_\_\_ which applicant believes to be a violation of the Provincetown Zoning By-law or the Massachusetts Zoning Act.

4. Applicant Christine Barker 169 Bradford Street, Provincetown, MA 02657  
(full name) (mailing address including zip code)

cb@ecotecture.com 646-322-8568  
(email) (telephone number)

Applicant is: (check one)  Owner  Tenant  Licensee  Prospective Buyer  Other Interested Party

Owner *(if other than applicant)* H. Bradford Rose 65 River Road, Belchertown, MA 01007  
(full name) (mailing address including zip code)

APPLICATION CONTINUES ON THE BACK OF THE PAGE