



**WESTWOOD BOARD OF APPEALS
APPLICATION FOR HEARING**

2016 NOV 10 A 11:32

1. Name of Applicant: Christopher Alberg
2. Applicant is (check one): Owner Tenant ___ Abutter ___ Purchaser ___ Other ___
3. Mailing address of Applicant: 1364 High St.
4. Telephone - Home: 781-769-1747 Business: 617-733-1587 Cell: 617-733-1587
5. E-Mail Address of Applicant: cr14@comcast.net
6. Address of Property subject to Hearing: 1364 High St.
7. Owner of Property: Christopher Alberg and Nicholas Schiavizzi
8. Mailing Address of Property Owner: 1364 High St.
9. Telephone - Home: 781-769-1747 Business: 617-733-1587 Cell: 617-733-1587
10. Deed recorded in: Norfolk County Registry of Deeds: Book # 33019 Page # 591
or Land Court Registry: Certificate # _____ Book # _____ Page # _____
11. Property MAP # 28 LOT # 282 DISTRICT _____
12. Has an appeal/application ever been filed with the ZBA on this property? (Y/N) Y If yes, when: 2006
13. NATURE of Application (check one):
 Appeal in accordance with MA G.L.Ch. 40A, Sec. 8 as amended
 Special Permit in accordance with MA G.L.Ch.40A, Sec. 9 as amended
 Variance in accordance with MA G.L. Ch. 40A, Sec. 10 as amended

TOWN CLERK
TOWN OF WESTWOOD

When applying for a Special Permit under Section 9.3 of the Westwood Zoning Bylaw, please make sure that you and/or your attorney refer to the specific bylaw regarding this section.

STATE the EXACT NATURE of this application including the applicable section number(s) of the Westwood Zoning Bylaw:

Section 4.4.3
I would like the board to remove provision 2 of the decision that prohibits me from renting the accessory apartment

Plan on a minimum of three months to complete the process.