



CITY OF ATTLEBORO, MASSACHUSETTS

Zoning Board of Appeals

Government Center, 77 Park Street

Attleboro, Massachusetts 02703

(508) 223-2222 Fax 222-3046

**FORM Z2 – APPLICATION
Request For An Extension Of Time**

Name of Applicant Filing Form Z2: _____

Address & Telephone Number: _____

Type of Zoning Board Application: _____

Describe Said Application: _____

Petitioner Of Said Application: _____

I hereby request an extension of time to: _____

Signature: _____

Date Form Z2 Filed: _____

(do not write below this line)

Certificate of Vote

This is to certify that at the Zoning Board meeting of _____, a majority vote passed
GRANTING the request for an extension of time to _____.

This is to certify that at the Zoning Board meeting of _____, a majority vote passed
DENYING the request for an extension of time.

**Lauren Stamatis, Clerk
Zoning Board**