



TOWN OF HOPKINTON

OFFICE OF BOARD OF APPEALS

TOWN HALL
18 MAIN STREET - ROOM 207
HOPKINTON, MASSACHUSETTS 01748-3209

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Request to Withdraw Filing Without Prejudice

Date: OCTOBER 25, 2005

To: Hopkinton Board of Appeals
Attn: Clerk

Re: Request to Withdraw Filing Without Prejudice

Applicant/Petitioner/Petitioner: HOPKINTON BOARD OF HEALTH

Property Address: 18 MAIN STREET

Check (✓): Application for Special Permit Petition for Variance Appeal

Dear Mr. / Madam Clerk:

I / We hereby respectfully request permission to withdraw without prejudice our filing with respect to the above referenced matter.

The reasons for the request are as follows: Per OCTOBER 20, 2005 MEETING WITH THE HOPKINTON ZONING-ENFORCEMENT OFFICER, IT IS THE BOARD OF HEALTH'S UNDERSTANDING THAT THE ZONING OFFICER'S AUGUST 29, 2005 LETTER IS NOT A DECISION IN REFERENCE TO MGL c. 40A SECTION 8.

I / We understand that pursuant to MGL c. 40A s. 16, after publication of the notice of public hearing, withdrawal without prejudice may be allowed only with the approval of the Board of Appeals. I / We understand that the granting of permission to withdraw is discretionary and not ordinarily allowed unless there is sufficient cause or reason. I / We understand that if the Board does not elect to allow my/our request to withdraw, the Board shall enter a Decision based upon the testimony and evidence presented at the public hearing. Thank you.

Very truly yours,

Signature: _____

Print: _____

Nancy Peters Chair B.O.H. 10/25/05
Name / Title

For Clerk's Use Only:

Date of Board's Vote on Withdrawal: _____, 200__ Vote Yes: _____ No: _____

Copy filed with Town Clerk? (✓) Yes: Date: _____, 200__

Form Date: November 2003