

## APPENDIX B

### APPLICATION FOR MAJOR OR MINOR SUBDIVISIONS

#### **Applicant's Contact Information**

Name: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

Phone#: Office: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Interest in property: \_\_\_\_\_

Interest in abutting properties, if any: \_\_\_\_\_

#### **Property Owner's Contact Information**

Name: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

Phone#: Office: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

#### **Applicant's Architect, Landscape Architect, Engineer, Planner or Surveyor Contact Information** (If more than one, please attach contact info for each one.)

Name: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

Phone#: Office: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

#### **Project Information**

**Name of Project:** \_\_\_\_\_

Address of site: \_\_\_\_\_

CCRD Book/Page #: \_\_\_\_\_ Tax Map/Lot #: \_\_\_\_\_

Zoning District: \_\_\_\_\_ Overlay District (If any): \_\_\_\_\_

Site size (acres): \_\_\_\_\_ # of Lots: \_\_\_\_\_ # Buildings: \_\_\_\_\_ # Dwellings: \_\_\_\_\_

\_\_\_\_ Minor Subdivision \_\_\_\_ Major Subdivision \_\_\_\_ Conservation Subdivision

#### **OTHER INFORMATION**

1. Is Board of Adjustment and Appeals approval required? \_\_\_\_\_
2. Are any ordinance waivers requested? \_\_\_\_ Yes \_\_\_\_ No (If yes, attach a list of waivers requested and reason for the request.)
3. Application fee per Town ordinance: \$ \_\_\_\_\_
4. This application form and all accompanying materials must be submitted to the Town Planner at least 21 days prior to the meeting at which it is to be considered by the Planning Board.

The undersigned, being the applicant, owner or legally authorized representative, states that all information contained in this application is true and correct to the best of his/her knowledge and hereby does submit the information for review by the Town and in accordance with applicable ordinances, statutes and regulations of the Town, state and federal governments.

\_\_\_\_\_  
Signature of Applicant/Owner/Representative

\_\_\_\_\_  
Date