CHELMSFORD PLANNING BOARD

SUBMISSION OF REVISED PLANS **(12/07)**

☐ Minor Site Plan ☐ Site Plan ☐ Special permit

PROJECT CONTACT: £ Developer £ Property Owner £ Business Owner £ Tenant/Leasee £ Buyer

Name:_____

Address: _____

Telephone #: _____Fax:_____

PROJECT LOCATION: Street Address: _____

Assessors' Map: _____Lot(s): _____

Zoning District(s):_____Lot Size: _____

DATE of ORIGINAL PLAN SUBMISSION: _____

DATE of 1st REVISED PLANS: _____

DATE of 2nd REVISED PLANS: _____

PROPOSED REVISIONS: Identify proposed revisions on the plans and within a project narrative

Signature of Applicant / Agent:_____ Date: _____

Signature by applicant/ agent acknowledges receipt and acceptance of the Planning Board's Site Plan Regulations and Procedures.

For Department Use Only:

Date Received: _____ *Reviewed by:* _____

Date Hearing Scheduled: _____ *Planning Board Action by:* _____