

CHELMSFORD PLANNING BOARD

MINOR SITE PLAN (12/07)

(see section 195-104 G. for definition of "minor site plan")

APPLICANT: £ Developer £ Property Owner £ Business Owner £ Tenant/Leasee £ Buyer

Name: _____

Address: _____

Telephone Number: _____

OWNER: Name: _____

Address: _____

Telephone Number: _____

If applicant is different than owner, a letter of authorization from the owner must accompany this form.

PROJECT CONTACT: Name: _____

Address: _____

Telephone #: _____ Fax: _____

PROJECT LOCATION: Street Address: _____

Assessors' Map: _____ Lot(s): _____

Zoning District(s): _____ Lot Size: _____

Recorded Plans: Book _____ Page _____

PERMITS / APPROVALS: *Check the appropriate boxes, identify dates of previous and/ or pending approvals and attach copies of decisions.*

- Planning Board (Special permit) _____
- Zoning Board of Appeals (special permit / variance / finding) _____
- Conservation Commission: _____
- Historic District Commission: _____
- Board of Health _____
- Board of Selectmen _____

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 Complete Filing Received: _____ *Reviewed by:* _____

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