

NEWPORT PLANNING BOARD

NEWPORT, NEW HAMPSHIRE 03773

APPLICATION FOR SITE PLAN REVIEW

Type of Request:

_____ Phase I Date _____

_____ Phase II Date _____

_____ Phase III Date _____

Tax Map _____ Lot # _____

Zone _____

1. Name: _____

2. Location: _____

3. Owner of Record (Name): _____ Phone: _____

(Address): _____

Email Address: _____ Fax: _____

4. Has an agent been appointed to represent the owner? Yes () No ()

5. Agent (Name to be one individual): _____

Address: _____

Phone: _____ Fax: _____

Email Address: _____

6. Have the conditions required for Final Site Plan Review been met in their entirety? Yes () No ()

If not, indicate all exceptions requested (attach additional sheets if necessary): _____

7. Are there any zoning restrictions? Yes () No ()

If yes, indicate all restrictions (attach additional sheets if necessary)

8. List any appeal, special exception or variance that has been granted or denied on this property by the Zoning Board of Adjustment:

9. Names and addresses of all abutters indicated in Town records within fifteen days prior to filing this application (use separate sheet).
10. List all maps and other material accompanying this application and the number of each:
- a. _____ Film copies of the plat
 - b. _____ Black-Blue on white prints
 - c. _____ Construction detail sheets
 - d. _____
11. Applicant proposes to: _____

12. Estimated cost of project: _____
13. Agreed date of submission to the Board: _____
14. Agreed date of Public Hearing: Preliminary _____
Final _____
15. The undersigned hereby requests approval by the Planning Board of the above identified.

Signature of Owner/Agent: _____

Date: _____

Office Use Only

Fee Paid: _____

Date: _____

By: _____