

TOWN OF WAKEFIELD PLANNING BOARD

Land Use Department 2 High Street, Sanbornville, NH 03872 Phone: (603)522-6205 Ext. 312 Fax: (603)522-2295

(For	Office Use Only)
	By: Lot:
FEES: Application Fee	: Major: \$450/ Minor:
	125 per submission @ \$* each
Recording fees:	
Prof. Review: N	Iajor: \$500/Minor: \$250:
Total received:	check#

SITE PLAN REVIEW APPLICATION

Major Site Plan Review: _____ Minor Site Plan Review: _____

§200 APPLICABILITY OF SITE PLAN REVIEW: Except as exempted by §201.3, the Site Plan Review Regulations apply to any building, construction or remodeling activity that develops, changes or expands a non-residential, multi-family residential or home occupation use of land or any other change or expansion of non-residential or multi-family use. Included are enlargement of structures and/or expansion of uses; conversion of structures and/or sites to new uses; a change in use or intensification of use of a structure or site; and conversion of buildings and sites to a condominium form of ownership.

To determine if the proposed changes are to be a "Major" or "Minor" site Plan Review, please refer to the Site **Plan Regulations.**

Tax Map:	Lot(s):	Zoning District:	Overlay	
Property Add	ress:			
Name of App	licant/Agent:			
Address:				
Telephone:		E-mail:	Fax:	
Name of Prop	erty Owner:			
Address:				
			Fax:	
Project Descri	iption:			
Dimensions a	nd Square Foota	age of Proposed Building(s):		

BUSINESS INFORMATION:

Name of Business:			
Type of Business:			
Number of Employees:		Off street parking available: Yes /	No
Parking Capacity:		Size of Parking Area: square t	feet
Hours of Operation:			
Deliveries: Yes / No	If yes, explain:		
Solid Waste Disposal: Yes / No			
Noise Generated: Yes / No	If yes, explain:		
Other information:			

The proposed business will be operated within the above parameters.

Certification and Agreement: To the best of my knowledge, all information submitted on this Application is true and correct. All proposed development will be in conformance with the information contained on the Application, and in the approved plan as well as the provisions of Town Ordinances and Regulations.

The owner/agent by filing an application, hereby gives permission for the Code Enforcement Officer or other Planning Board designee to enter the property which is the subject of the application with twenty-four (24) hours' notice for the purpose of inspection as may be appropriate.

Applicant/Agent Signature:	Date:
Applicant/Agent Signature:	Date:
Owner Signature:	Date:
Owner Signature:	Date:

SIGNATURE PAGE MUST BE ORIGINALLY SIGNED, OR APPLICATION WILL NOT BE PROCESSED.

CERTIFIED LIST OF ABUTTERS

According to RSA 672:3 "Abutter" is defined as "Any person whose property is located in New Hampshire and adjoins or is directly across the street or stream from the land under consideration by the local Land Use Board. For purposes of receiving testimony only, and not for purposes of notification, the term abutter shall include any person who is able to demonstrate that his land will be directly affected by the proposal under consideration. For purposes of receipt of notification by a municipality of a local Land Use Board hearing, in the case of an abutting property being under a condominium or other collective form of ownership, the term abutter means the officers of the collective or association, as defined in RSA 356-B::3, XXIII.

The following information must be completed by the applicant in order to begin the subdivision/site plan review/lot line adjustment application process. Below, list the verified names and mailing addresses of the applicant, authorized agent(s), engineer, architect, land surveyor, soil scientist, consultant, abutter, holders of conservation easements or restrictions on adjacent lands, municipal/regional planning commissions, (if a regional notice is required), associations, and etc., not more than five (5) days prior to submission, per RSA 676:4,I(b). Abutters' names and mailing addresses must be verified against the records kept in the Wakefield Assessor's Office. Attach additional copies of this form if necessary. Include four (4) sets of mailing labels for each person listed below.

Map/Lot	Name of Property Owner	Mailing Address of Property Owner

Name of Person Preparing List	Date Prepared
	-
Preparer's Signature	Date