

**APPLICATION FOR SITE PLAN REVIEW**

Submission Date: \_\_\_\_\_  
Scheduled Review Date: \_\_\_\_\_  
Application Fee Paid: \_\_\_\_\_

**LOCATION OF PROJECT:**

Street Address: \_\_\_\_\_

Assessors's Map No. \_\_\_\_\_ Lot: \_\_\_\_\_

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

Applicant Address/ Phone No. \_\_\_\_\_

Owner Name / Address / Phone (if not applicant ): \_\_\_\_\_

The owner's title to the land is derived under deed from

\_\_\_\_\_

dated: \_\_\_\_\_ and recorded in \_\_\_\_\_ Registry of Deeds, Book: \_\_\_\_\_  
Page \_\_\_\_\_.

ENGINEER/ SURVEYOR: \_\_\_\_\_

DESCRIPTION OF PROJECT - ( Describe proposed use or uses of the property.  
Provide as much information as possible, attach additional pages if needed) :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ESTIMATED COST OF SITE IMPROVEMENTS: ( provide estimated cost of all site improvements, exclusive of building construction cost, including, but not limited to the following: paving, drainage, sidewalks, handicap access facilities, reuse storage and disposal facilities, retaining walls, outdoor lighting and landscaping) :

ESTIMATED COST \_\_\_\_\_ Prepared by \_\_\_\_\_ Date \_\_\_\_\_

Total land area involved: \_\_\_\_\_ Zoning Classification \_\_\_\_\_

Signed: \_\_\_\_\_

Applicant or Applicant's Representative

Type or Print: NAME/ADDRESS \_\_\_\_\_

(See attached checklist of information to be shown on Site Plan)

**CHECKLIST FOR REQUIRED INFORMATION FOR SITE PLAN APPROVAL**

- \_\_\_ 1. Title of drawing, including name and address of applicant and person responsible for preparation of such drawing.
- \_\_\_ 2. North arrow, date, and scale (minimum scale 1" = 40').
- \_\_\_ 3. Lot size and zoning classification.
- \_\_\_ 4. Boundaries of property plotted to scale.
- \_\_\_ 5. Proposed use(s) of the property.
- \_\_\_ 6. Location and dimensions of all existing and proposed buildings, including setback distances and square footage calculations for each use.
- \_\_\_ 7. Location and design of parking and loading areas, including:
  - \_\_\_ a. Calculation of required number of spaces (see Section VI B. 6. Of the Zoning Bylaw for specific requirements. NOTE: Parking calculations for retail and office uses shall be based on gross floor area unless detailed building plans are submitted which delineate storage areas not for customer use.).
  - \_\_\_ b. Delineation of both regular and handicapped spaces.
  - \_\_\_ c. Proposed surface materials.
  - \_\_\_ d. Reserve parking area (NOTE: The Planning Board may require that more than the minimum number of parking spaces be provided if the nature of the proposed use warrants such provision.).
- \_\_\_ 8. Proposed ingress and egress routes, including location of road cuts (NOTE: Massachusetts Department of Public Works approval is required for all road cuts on State highways. In addition, road cuts for projects of over 50 residential units or 25,000 square feet of non-residential space require the preparation of an Environmental Notification Form. If applicable, attach evidence of DPW road cut permit and ENF.).
- \_\_\_ 9. Grading and drainage plan showing existing and proposed contours (Drainage calculations must be submitted to the Board of Health.).
- \_\_\_ 10. Location and design of all existing or proposed site improvements, including:
  - \_\_\_ a. Walkways, sidewalks, and handicapped ramps.
  - \_\_\_ b. Refuse storage and disposal.
  - \_\_\_ c. Drains and culverts.
  - \_\_\_ d. Retaining walls and fences
  - \_\_\_ e. Outdoor storage area.

- \_\_\_ f. Outdoor lighting facilities.
- \_\_\_ 11. Landscaping plan, including:
  - \_\_\_ a. Calculations of the proposed green space (see Appendix II of the Bylaw).
  - \_\_\_ b. Location and type of shade trees (one per ten parking spaces; contact the Town Tree Warden).
  - \_\_\_ c. Delineation of buffer zones where abutting a residential district.
- \_\_\_ 12. Existing water courses, wetlands, or other natural features of the site.
- \_\_\_ 13. Location and design of wells and/or septic systems (NOTE: Complete septic system plans must be submitted with the Site Plan for Board of Health approval).
- \_\_\_ 14. Ruled box for date and Board signatures.
- \_\_\_ 15. Title reference as indicated on the Site Plan application.



---