



TOWN OF SEEKONK

FORM **D**

PLANNING BOARD

100 PECK STREET, SEEKONK, MA 02771

1-508-336-2961

APPLICATION FORM FOR APPROVAL OF SITE PLAN REVIEW

Date: _____

Applicant Name _____ Phone No. _____

Applicant Address _____

Address of Subject Property _____

Subject Property Plat No. _____ Subject Property Lot No. _____ Present Zoning _____

Checklist Form D:

- Application Form (2 x) Please note both copies must be originals, 1 copy for Planning and 1 copy for Town Clerk.
- Application fee is \$2.00 dollars per parking & loading space with a \$25 dollar minimum fee, CK # _____ made out to the Town of Seekonk. The cost for an outside consultant review shall be borne by applicant
- Certificate of Good Standing, completed and signed by Tax Collector
- Applicant responsible for forwarding (1) copy of Plans and Drainage Report to Consulting Engineers. (Planning office will advise who the Engineers are for the project).
- Site Plan received (8) copies and (1) 11" x 17" conforming to the applicable contents of sec. 5.3 in the rules & regs. Governing subdivision of land in Seekonk. (5) Plans after approval.
- Site Plan Received (1) copy CD or DVD
- Erosion & Sedimentation Control Plan conforming with Categories 20B & 20C of General By-laws.
- Drainage Plan/Calculations conforming with Categories 20B & 20C of General By-laws
- Landscaping Plan



Lighting Plan



Traffic study or documentation that sec. 10.6.1.20 does not apply



Architectural Plan

Received by:

Date: _____

*Signature of Applicant

Time: _____

*Signature: _____

Address of Applicant _____

*Signature of Owner or Notarized letter (if applicable)

Address of Owner _____

***Please use blue pen to sign**