



TOWN OF SEEKONK

FORM B

PLANNING BOARD

100 PECK STREET, SEEKONK, MA 02771

1-508-336-2961

APPLICATION FOR APPROVAL OF PRELIMINARY PLAN

Date: _____

Applicant Name: _____ Phone No.: _____

Applicant Address: _____

Address of Subject Property: _____

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

1. Deed of property recorded in Bristol County Registry: Book: _____ Page: _____

2. Name of Engineer or Surveyor: _____ Mass Lic. No.: _____

Address: _____

3. Location and Legal Description of Property (Include Public and Private Ways Bounding Property)

Checklist Form B:

- Application Form (2x)
Please note both copies must be originals, 1 copy for Planning, 1 copy for Town Clerk in accordance with the requirements of §4.1 and §4.2.1 of the Planning Board Regulations
- Application fee \$300 per plan, Ck# _____ (made payable to the Town of Seekonk)
- Certificate of Good Standing, completed and signed by Tax Collector
- One copy of "Certified List of Abutters" Form G and the original drawing of the Definitive Plan
- Plans received (9) prints, (1) 11" X 17", (see sec 4.1 and 4.2 of Rules & Regulations) and (3) upon approval

To the Planning Board:

The undersigned, believing that the accompanying plan of his property in the Town of Seekonk does not constitute a subdivision within the meaning of the Subdivision Control Law, herewith submits said plan for a determination and endorsement that Planning Board approval under the Subdivision Control Law is not required.

Received by Planning Board or Town Clerk:

Applicant:

Date

*Signature of Applicant

Time

Print Name

*Signature

Address of Applicant

Owner:

*Signature of Owner or Notarized letter (if applicable)

Print Name

Address of Owner

***Please use blue pen to sign**