

TOWN OF PLYMOUTH, MASSACHUSETTS / PLYMOUTH PLANNING BOARD

FORM B - APPLICATION

APPLICATION FOR APPROVAL OF A PRELIMINARY PLAN

This application must be completed and submitted with one (1) full size, one (1) 11" x 17" reduced copies and a PDF of the Preliminary Subdivision Plan to which it relates. A copy of this application may be used as a notice to the Town Clerk and Board of Health of the submission of the plan, as provided in Section 81-S, Chapter 41, G.L.

To the Planning Board: The undersigned, being the Owner of all land included within a proposed subdivision shown on the accompanying plan entitled:

Plan Title: _____

Plan filed on date below:

Date: _____

Prepared by: _____

Address: _____

Property Address: _____

Assessors' Map: _____

Lot(s): _____

(Official Use Only)

Hereby submits plan as a PRELIMINARY subdivision plan showing in a general way the information required under the Rules & Regulations Governing the Subdivision of Land of the Town of Plymouth and the Plymouth Planning Board and makes application to the Board for the approval of said Preliminary Plan.

THE PETITIONER/APPLICANT CERTIFIES THAT THERE IS NO INFRINGEMENT OF WORK OR STRUCTURES ON PLYMOUTH TOWN PROPERTY OUTSIDE OF THE RIGHT-OF-WAY AND/OR THE PROJECT DOES NOT REQUIRE ACCESS ON/OVER/THROUGH TOWN PROPERTY. IF WORK, ACCESS, OR STRUCTURES ARE PROPOSED ON TOWN PROPERTY, YOU MUST NOTIFY THE TOWN MANAGERS OFFICE, IN WRITING, IMMEDIATELY. FAILURE TO OBTAIN THE TOWN'S PERMISSION OR ACKNOWLEDGMENT OF PLANS THAT INCLUDE WORK, ACCESS, OR STRUCTURES ON TOWN PROPERTY WILL RESULT IN THE DELAY OF THE PERMIT REVIEW PROCESS.

** Is this property classified as Chapter 61 land? YES ____ NO ____ If so, the applicant is required to notify the Town Assessor **

The Owner's title to the land is derived from deed from _____ dated _____ and recorded in Plymouth Deeds Book: _____ Page: _____ or registered in the Plymouth Land Registration Office under Land Court Certificate of Title Number: _____

Signature of Applicant: _____

Signature of Owner (if other than the applicant): _____

Phone Number: _____