

SALISBURY PLANNING BOARD PRELIMINARY PLAN
FILING CHECKLIST

Applications will not be stamped in at the Town Clerk's office for the Planning Board, until the Planning Department determines that the following items are included with the application:

1. Application must be filled out completely and correctly. (Map and Parcel must be included and can be found in the Assessor's Office)
2. Preliminary Plan filing fee. Checks payable to the Town of Salisbury.
3. Plan drawn in accordance with the requirements listed in Salisbury's Subdivision Control Regulations Section 5 (7 COPIES).
4. Treasurer's Office signature to insure all Taxes are paid up to date on the property in question and any applicable betterments are paid in full.
5. Copy of Registered Deed
6. Electronic Copy of Completed Application

IMPROPER OR INCOMPLETE FILINGS WILL RESULT IN A DELAY IN DECISION, TOWN CLERK WILL SIGN AND STAMP AFTER PLANNING DEPARTMENT SIGNS OFF.

Planning Department

Town Clerk

***** Notes to Applicant *****

Board of Health will approve or Disapprove plans within 45 Days of submission. Planning Board has up to 45 Days from submission to make a decision.

**SALISBURY PLANNING BOARD
FORM B
APPLICATION for APPROVAL of a PRELIMINARY PLAN**

_____ Map: _____ Lot: _____
Date

Applicant's Name: _____

Applicant's Address: _____

Telephone #: _____

Owner of Property: _____

Owner's Address: _____

Plan Entitled: _____ Dated: _____

Zoning District: _____

Lots Created: _____

Description of Proposed Work: _____

Other Permits Required and Status of Applications: _____

Waivers Requested: _____

Copy of Application and Plan Received by Board of Health:

Date: _____

Time: _____

Signature: _____

PRELIMINARY PLAN SUBDIVISION APPLICATION
TAX AND BETTERMENT PAYMENT CERTIFICATION

Date: _____

Map: _____ **Parcel:** _____

Owners Name: _____

Property Address: _____, Salisbury MA

I, _____, certify that all taxes and applicable betterment's have been paid in full for the property located at **Map** _____ **Parcel** _____. The next billing date is _____.

Signature: _____
Treasurer or Treasurer's Clerk

Date: _____

Attachment 1

Form B Plan Submittal Checklist

Before any Form B APPLICATION for APPROVAL of a PRELIMINARY PLAN can be filed at the town clerk's office, the following departments must receive the specified information and sign below that the information has been received. Departments have 45 days within which they may approve, disapprove, or comment on the proposed plan.

Board of Health

(1 Set of Plans) Received By: _____ Date: _____
(1 copy of application) Received By: _____ Date: _____

Fire Department

(1 Set of Plans) Received By: _____ Date: _____
(1 copy of application) Received By: _____ Date: _____

Department of Public Works

(1 Set of Plans) Received By: _____ Date: _____
(1 copy of application) Received By: _____ Date: _____

Building Department

(1 Set of Plans) Received By: _____ Date: _____
(1 copy of application) Received By: _____ Date: _____

Conservation Commission

(1 Set of Plans) Received By: _____ Date: _____
(1 copy of application) Received By: _____ Date: _____

Police Department

(1 Set of Plans) Received By: _____ Date: _____
(1 copy of application) Received By: _____ Date: _____

Assessor's Department

(1 Set of Plans) Received By: _____ Date: _____
(1 copy of application) Received By: _____ Date: _____

Planning Department

(1 Set of Plans) Received By: _____ Date: _____
(1 copy of application) Received By: _____ Date: _____