ATTACHMENT 1



Planning Department Town of Salisbury 5 Beach Road Salisbury, MA 01952 (978) 463-2266 planningdept@salisburyma.gov

SALISBURY PLANNING BOARD MINOR MODIFICATION OF A SITE PLAN APPROVAL FILING <u>CHECKLIST</u>

Applicants encouraged to meet with planning department for review of application prior to filing. Applications will not be considered <u>COMPLETE</u> for the Planning Board, until the Planning Department determines that the following items are included with the application:

Required Submission Materials:

- 1. Completed Application for Minor Modification of a Site Plan Approval. Attachment 1
- 2. Modification of a Site Plan Approval Fee Checks payable to the Town of Salisbury.
- 3. Project Description / Narrative explaining requested modification.
- 4. Additional Materials as Needed / Required to support the Application.
- **5.** Updated Site Plans drawn to scale and in conformance with Section II.B.1 of the Site Plan Review requirements.
- 6. 8 paper copies of all site plans and supporting documents. PDFs of all documents shall be sent to the Planning Department. (<u>asstplanner@salisburyma.gov</u>)

Planning Department Signature: _____ Date: _____

*COMPLETE APPLICATION MUST BE SUBMITTED TO THE PLANNING DEPARTMENT BY 12 PM ON THE WEDNESDAY A WEEK BEFORE THE NEXT SCHEDULED PLANNING BOARD MEETING.

APPLICATION FOR MINOR MODIFICATION OF A SITE PLAN APPROVAL

APPLICANT & PROPERTY OWNER INFORMATION:

APPLICANT'S NAME:	
APPLICANT'S ADDRESS:	
TELEPHONE #:	E-MAIL ADDRESS:
OWNER'S NAME (if different from applicant):	
OWNER'S ADDRESS (if different from applicant):	
	E-MAIL ADDRESS:
SITE INFORMATION:	
PROJECT ADDRESS:	
MAP: LOT:	
ZONING DISTRICT(S):	
LOT SIZE:	
CURRENT USE:	
PROJECT/PLAN INFORMATION:	
PLAN TITLE:	
DATE OF REVISION:	
TELEPHONE #:	E-MAIL ADDRESS:
Briefly state requested modification:	
Applicant's Signature:	Date:
Owner's Signature (if not applicant):	Date: