## THE FOLLOWING SECTION IS FOR TOWN OFFICIAL REVIEW & SIGNATURES

PROPERTY LOCATION / STREET ADDRESS 519 CHAFFEEVILLE ROAD

### AGENT SECTION

In reviewing and approving any application for a permit, the Town officer shall determine that the following provisions have been met:

- ☒ The application is complete and the applicable fee has been paid.
- ☐ All applicable regulations have been met or varied by the modification process.
- ☐ **Modification:** ☐ N/A ☐ Approved ☐ Denied
- ☐ **Extension:** ☐ N/A ☐ Granted ☐ Denied **Expiration Date:** ___/___/___

### OTHER APPROVALS REQUIRED

To demonstrate that the proposal complies with local Inland Wetlands, Health District and Public Works requirement, the following approvals may be required and any conditions of approval shall be incorporated into the permit:

***MUST NOTIFY HEALTH DIRECTOR IF CUTTING OR FILL IS 12" OR GREATER***

| | | |
|---|---|---|
| DIRECTOR OF HEALTH | DATE | COMMENTS |
| INLAND WETLAND AGENT | DATE | COMMENTS |
| DIRECTOR OF PUBLIC WORKS | DATE | COMMENTS |

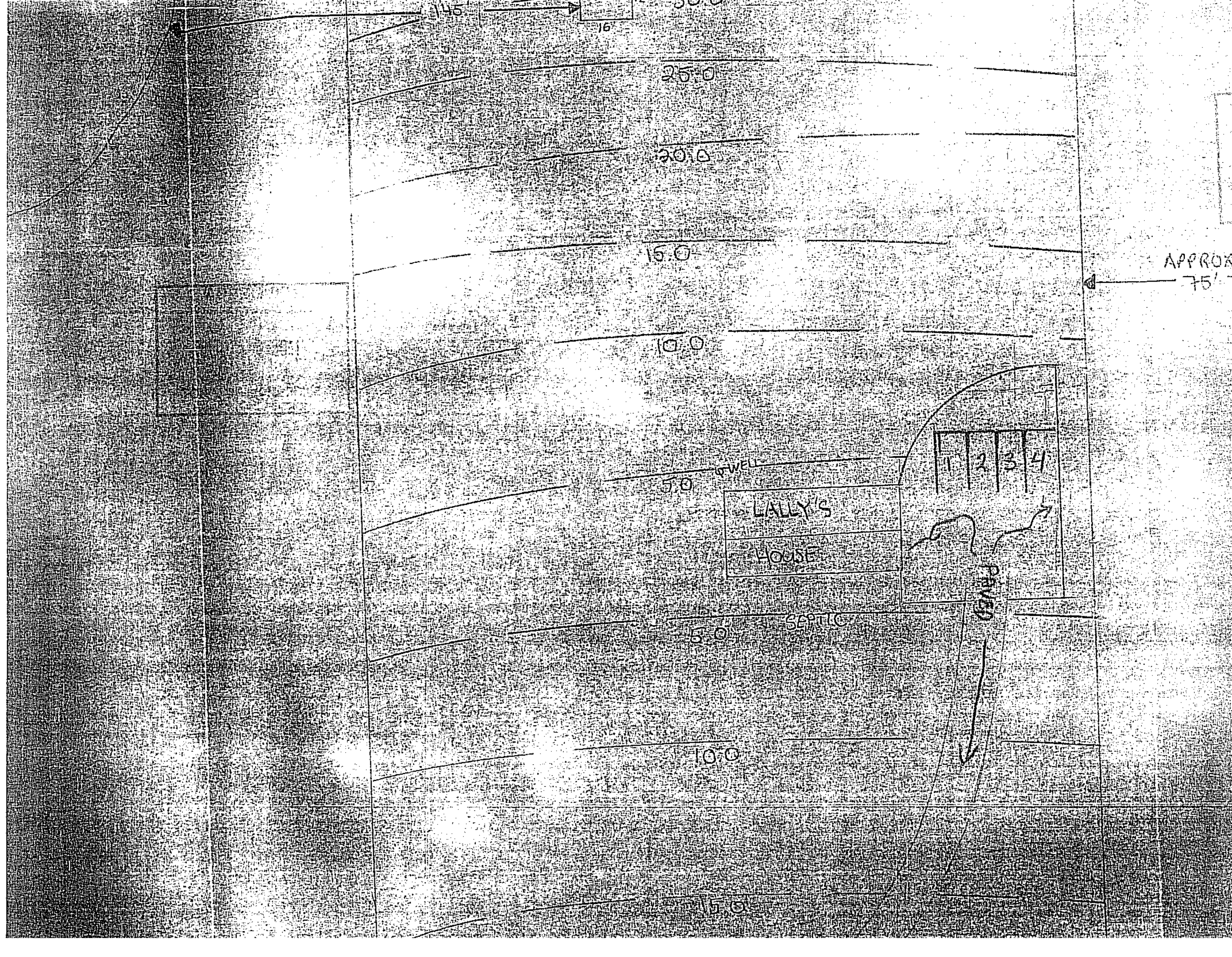
### FINAL ACTION FOR PERMIT

Based on the applicant's submissions which are attached to or referenced on this form, the permit has been:

- ☒ Approved as submitted.
- ☐ Approved with modification or conditions as stated below.
- ☐ Denied.

The following comments, condition(s) of approval or reason(s) for denial apply:

| AUTHORIZED AGENT: | SIGNATURE | DATE |
|---|---|---|
| | Bruce Green | 7/12/11 |



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