

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

PROPERTY LOCATION / STREET ADDRESS

11 Hillyndale

**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:

Proposed work must be completed and approved by 10/12/16. Please schedule an inspection when work is complete.

**AUTHORIZED AGENT:**

SIGNATURE

*B. L. True*

DATE

7/12/16

#4 Hillynsdale Rd.

2 Car Garage

#1  
#2

20'

22'

Rowed Drive

50'

Aska Tree

#3  
#4  
#5

30'

Maple Tree

Maple Tree

20'  
Pine Tree

Hillynsdale Road

Town of Mansfield  
Housing Inspection  
JUL 12 2016  
APPROVED  
Parking Area Site Plan

MASSACHUSETTS  
PLANNING BOARD  
TOWN OF MANSFIELD  
100 STATE STREET  
MANSFIELD, MA 01961  
TEL: 508-335-2000  
FAX: 508-335-2001

