

THE FOLLOWING SECTION IS FOR TOWN OFFICIAL REVIEW & SIGNATURES

PROPERTY LOCATION / STREET ADDRESS

402 STAFFORD 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:

Approved without barriers in front of spaces
due to no history of parking issues.

Barriers may be required at a later date
if issues arise.

AUTHORIZED AGENT:

SIGNATURE:

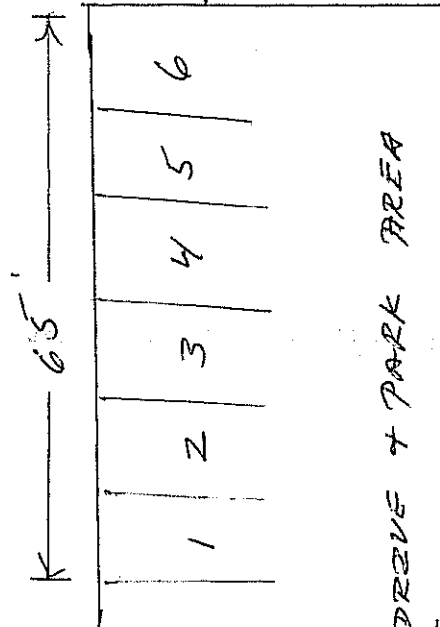


DATE

6/21/11

44' TO BOUNDARY

PARKING
PLAN FOR
402 STAFFORD



MOBILE HOME 14X53

30'

109' TO
RTE 32

14'

12'

SCALE
1" = 20'

