THE FOLLOWING SECTION IS FOR TOWN OFFICIAL REVIEW & SIGNATURES PROPERTY LOCATION / STREET ADDRESS		
		AGENT SECTION
provisions have been met The application is con All applicable regulati Modification:	: mplete and the ap ions have been me N/A	on for a permit, the Town officer shall determine that the following oplicable fee has been paid. et or varied by the modification process. pproved Denied Expiration Date: / /
	OTH	IER APPROVALS REQUIRED
		es with local Inland Wetlands, Health District and Public Works be required and any conditions of approval shall be incorporated
		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
Approved as submApproved with modDenied.	nitted. dification or cor	ich are attached to or referenced on this form, the permit has been: nditions as stated below. approval or reason(s) for denial apply:
AUTHORIZED AGENT: SIGN	NATURE W	11-11-15 DATE H 11-15

