



TOWN OF DOUGLAS
FORM C
Application For Approval of Definitive Subdivision Plan

OFFICE USE ONLY
APPL No. _____
SUBMITTED _____
FEE _____

I. Applicant Information

Owners Name _____		Contact Person _____	
Street Address _____		Additional Address _____	
City/Town _____	State _____	Zip Code _____	
Telephone Number _____	Fax Number _____	Email Address _____	
Other Comments _____			

II. Owner Information

Name _____		Contact Person _____	
Street Address _____		Additional Address _____	
City/Town _____	State _____	Zip Code _____	
Telephone Number _____	Fax Number _____	Email Address _____	
Other Comments _____			

III. Plan Information

Title of Plan: _____

Drawn By: _____

PLS registration #: _____

Date on Plan: _____

IV. Site Information

Assessors Map _____	Assessors Parcel _____	Deed Book _____	Deed Page _____
Street Address _____		Additional Address _____	
Are taxes current on the property? _____			



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V. TITLE TO THE PROPERTY

The Owner's title to the land that is the subject matter of this application is derived from deed/will/other of _____
 dated _____, recorded in _____
 Registry of Deeds, Volume _____, Page _____ or as land court certificate of title no. _____

VI. ZONING REQUIRMENTS

The land is Zoned RA RC-1 RC-2 VR CB COMM IND
 The frontage required under zoning is _____ feet
 The lot area required under zoning is _____ square feet.

VII. PLAN PROPOSAL

This is a Residential non-residential subdivision (check one)
 The plan shows land located at _____
 The plan shows the division of _____ acres of land into _____ lots, intended for Building thereon, numbered _____, and _____ parcels not intended for Building thereon.

VII. FEES

Applicants must submit the following information to confirm fee payment:

Fee Calculations _____

Check Number _____ Check date _____

Payor name on check _____ Applicant name (if different from payor) _____

* Please make all checks payable to the Town of Douglas *



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VIII. SIGNATURES

I hereby certify under the penalties of perjury that the foregoing Special Permit Application and accompanying plans, documents, and supporting data are true and complete to the best of my knowledge. I understand that the Planning Board will place notification of this Submittal in a local newspaper at the expense of the applicant in accordance with the requirements of the State Zoning Act.

I further certify under penalties of perjury that a current list of all abutters and other relevant parties of interest were provided to the Planning Board office with current mailing addresses. These parties will be notified by the Douglas Planning Board pursuant to the requirements of the State Zoning Act. Notice must be made in writing by hand delivery or certified mail (return receipt requested) to all abutters within 300 feet of the property line of the project location.

Signature of Applicant

Date

Signature of Property Owner (if different)

Date

Signature of Representative (if any)

Date

Filed with the Town Clerk on _____

Christine Furno, Town Clerk