



TOWN OF DOUGLAS
SITE PLAN REVIEW
SPECIAL PERMIT APPLICATION FORM
Pursuant to Section 6.02 of the Douglas Zoning Bylaw

OFFICE USE ONLY
ZBA No. _____
SUBMITTED _____
FEE _____

I. Applicant Information

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

II. Representative Information

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

III. Owner Information

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

IV. Site Information

Assessors Map	Assessors Parcel	Deed Book	Deed Page
Street Address	Additional Address		
City/Town	State	Zip Code	
Other Comments			



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V. General

a.) Reason for Application (Check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> New Use | <input type="checkbox"/> Commercial Construction |
| <input type="checkbox"/> Expansion of Existing Use | <input type="checkbox"/> Industrial Construction |
| <input type="checkbox"/> Other Special Permit App. | <input type="checkbox"/> Religious Construction |
| <input type="checkbox"/> Other (please indicate): | <input type="checkbox"/> Public Educational Construction |

b.) Do any variances or non-conformities exist for this existing site? If so, please identify the non-conformity, the status (ie. pre-existing or new), and pertinent ZBA Case # and a copy of the decision.

c.) Please provide a brief overview of the Project Scope:

VI. Submittal Requirements

- 1) Has a current certified abutters list for all abutters within 300-feet of the subject properties (and all parties in interest) been submitted with the Application? YES NO
- 2) Have completed certified return receipt cards and an abutter notification form been submitted with the application for each abutter/party of interest identified in item 1, above? YES NO
- 3) Have five (5) copies of this complete submittal been transmitted to the Zoning Board of Appeals? YES NO
- 4) Does the Application Package Include a written narrative detailing the scope of the project and also addresses the following issues:
- | | | | |
|---------------------------------|------------------------------|-----------------------------|------------------------------|
| a) Proposed Use? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| b) Hours of Operation? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| c) Traffic Impact & Assessment? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |



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- | | | | |
|---|------------------------------|-----------------------------|------------------------------|
| d) Stormwater Management? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| e) Other potential nuisance issues? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| 5) Has a plan been submitted at a suitable scale to clearly show the scope and intent of the proposed project? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| a) Has a Floor Plan been prepared and stamped by a Professional Architect? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| b) Has a Site Plan been prepared and stamped by a Professional Engineer? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| c) Has a Site Plan been prepared and stamped by a Professional Land Surveyor? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| d) Does the Site Plan show all property boundaries and building setbacks? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| e) Does the Site Plan show all existing and proposed placement of buildings? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| f) Does the Site Plan show all existing and proposed placement of structures? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| g) Does the Site Plan show all existing and proposed parking spaces? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| h) Does the Site Plan show all existing and proposed loading areas? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| i) Does the Site Plan show all existing and proposed driveway openings? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| j) Does the Site Plan show all existing and proposed driveways? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| k) Does the Site Plan show all existing and proposed service areas? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| l) Does the Site Plan show all facilities for surface and ground drainage and erosion controls? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| m) Does the Site Plan show all landscape features (such as fences, walls, planting areas and walks)? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| n) Does the Site Plan show all facilities for surface and ground drainage and erosion controls? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |



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VII. FEES

The fees for work proposed under this Special Permit Application shall be in accordance with the Town of Douglas Fee Schedule for Special Permit Applications.

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 **

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 Zoning Board of Appeals 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 Zoning Board of Appeals office with current mailing addresses. These parties will be notified by the Douglas Zoning Board of Appeals 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 _____

Printed or Typed Name of Applicant _____

Signature of Property Owner(s) _____ Date _____

Printed or Typed Name of Property Owner(s) _____

Signature of Representative (if any) _____ Date _____

Printed or Typed Name of Representative (if any) _____

***Please note that all above signatures must be provided unless a notarized authorization form accompanies the application submittal granting an individual the authority to sign and/or act on behalf of the Owner/Applicant.*