

Town of Greenville, New Hampshire

Planning Board

Application for Subdivision

APPLICANT INFORMATION

Name: _____

Address: _____

Telephone: (H) _____ (C) _____

PROPERTY INFORMATION

Assessor's Map #: _____ Lot #: _____

Zoning District: _____

Size of Existing Parcel: _____

Size of Parcels after Subdivision: _____

Parcel 1: _____ Parcel 2: _____ Parcel 3: _____

Parcel 4: _____ Parcel 5: _____ Parcel 6: _____

SURVEYOR INFORMATION

Company Name: _____

Surveyor Name: _____

License #: _____

Address: _____

Telephone: _____ E-mail: _____

SIGNATURES

I/We as owner(s) or as duly authorized agent(s) for the owner(s) of the property described in the attached subdivision plan, do hereby submit this subdivision plan for review as required by the regulations of the Planning Board of the Town of Greenville. I/We attest that to the best of my/our knowledge all of the information on this application and in the accompanying materials and documentation is true and accurate.

_____ Signature of Property Owner	_____ Date
--------------------------------------	---------------

_____ Signature of Property Owner	_____ Date
--------------------------------------	---------------

_____ Signature of Applicant <i>(If different from owner)</i>	_____ Date
--	---------------

I/We hereby authorize members of the Greenville Planning Board, Building Inspector, and any other pertinent Town Department to enter my property for the purpose of evaluating this application, including performing inspections during the application process.

_____ Signature of Property Owner	_____ Date
--------------------------------------	---------------

_____ Signature of Property Owner	_____ Date
--------------------------------------	---------------