

TOWN OF PHIPPSBURG
Home Business Proposal and Determination

BUSINESS OWNER INFORMATION

NAME: _____ WORK PHONE: _____
E-MAIL ADDRESS: _____ HOME PHONE: _____
MAILING ADDRESS: _____ CELL PHONE: _____

LAND OWNER INFORMATION (IF DIFFERENT)

NAME: _____ WORK PHONE: _____
E-MAIL ADDRESS: _____ HOME PHONE: _____
MAILING ADDRESS: _____ CELL PHONE: _____

LAND INFORMATION

ADDRESS: _____ TAX ACCOUNT NO: _____
MAP: _____ LOT: _____ LAND AREA: SF: _____ ACRES: _____
P ZONE: _____ S ZONE: _____ SETBACK: _____ SUBDIVISION: _____
NON-CONFORMING STRUCTURE: _____ NON-CONFORMING LOT: _____
ABUTTERS: _____

BUSINESS INFORMATION

NAME: _____
DESCRIPTION: _____

SIGNATURE: _____ DATE: _____

PLANNING BOARD DETERMINATION

Date Received: _____ Check One: APPROVED APPROVED WITH RESTRICTIONS DENIED TABLED

Restrictions/Comments

Signatures

BOARD CHAIRMAN: _____ DATE: _____
BOARD VICE CHAIRMAN: _____ DATE: _____
MEMBER: _____ DATE: _____
MEMBER: _____ DATE: _____
MEMBER: _____ DATE: _____