

**TOWN OF PHIPPSBURG
PLANNING BOARD APPLICATION**

OWNER INFORMATION

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

AGENT INFORMATION

NAME: _____ PHONE: _____
COMPANY: _____ E-MAIL ADDRESS: _____
MAILING ADDRESS: _____

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: _____

PROJECT DESCRIPTION

PERMANENT: _____ TEMPORARY: _____ BUILDING PLANS ATTACHED: _____
SIGNATURE: _____ DATE: _____ CEO COMMENTS ATTACHED: _____

PLANNING BOARD ACTION

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: _____