			CAM REQUI	RED YE	S:  NO:		
MILFORD PLANNING & ZONING BOARD PETITION FOR SITE PLAN REVIEW							
I (We):HEREBY PETITION FOR A:							
SITE PLAN REVIEW:		А	MENDMENT	TO A SITE PLAN	REVIEW:		
TO ESTABLISH:		OR CONSTRUCT:		(description)			
ON THE FOLLOWING PROPERTY:				(description)			
ADDRESS OF PROPERTY:				SEWER:	SEPTIC:		
ASSESSORS MAP: BLOCK:	PARCEL: _		ZONE:	ACRES:			
APPLICANT'S NAME:							
PHONE NUMBER:		EMAIL ADDRESS:					
APPLICANT'S MAILING ADDRESS:							
APPLICANT OR DULY AUTHORIZED AGENT SIGNATURE WITH TITLE:							
(I HEREBY CERTIFY THAT I AM THE DULY AUTHORIZED AGENT AND AM MAKING THIS APPLICATION ON BEHALF OF AND WITH THE FULL AUTHORITY OF THE OWNER OF THE PROPERTY)							
PROPERTY OWNER'S NAME:			PHONE NUM	1BER:			
PROPERTY OWNER'S MAILING ADDRESS:							
IF APPEARING BY ATTOREY OR AGENT:							
NAME:							
SIGNATURE:			PHONE NUM	1BER:			
MAILING ADDRESS:							
HAS ANY PREVIOUS PETITION FOR A SITE PLAN REVIEW BEEN FILED FOR THIS PROPERTY?							
YES: NO:							
IF YES, GIVE DECISION: APPROVED: DENIED: DATE:							
•	ES OF THIS APPLICAT	TION WILL NOT BE AC	CEPTED				
FEE – SEE SCHEDULE OF ZONING FEES RECEIVED OF:				DATE:			
RECEIVED BY:  DATE APPLICATION FILED:		AMOUNT:  DATE APPLICATION CE	RTIFIED:	RECEIPT NUMBER:			
PLANNING & ZONING BOARD ACTION: DATE:		APPROVED:		DENIED:			

COPIES OF ALL REQUIRED PLANS SHOWING ALL PERTINENT INFORMATION RELATIVE TO THE PETITION (SEE SECTION 7.1 & 7.2 OF THE ZONING REGULATIONS)				
THE APPLICANT SHALL SUBMIT PLANS TO THE PLANNING & ZONING OFFICE FOR REVIEW PRIOR TO FORMAL APPLICATION BEING MADE. IF THE PLANS ARE FOUND TO CONFORM WITH THE ABOVE QUOTED SECTIONS, A TRANSMITTAL SHEET WILL BE PREPARED BY THE PLANNING & ZONING DEPARTMENT TO ALLOW SUBMISSION BY THE APPLICANT TO EACH CITY DEPARTMENT WHOSE APPROVAL IS REQUIRED. THE APPLICANT IS RESPONSIBLE FOR OBTAINING ALL APPLICABLE DEPARTMENT APPROVALS AND FORWARDING ALL REPORTS WITH PROJECT PLANS, A PROPERLY COMPLETED APPLICATION AND FEE TO THE PLANNING & ZONING OFFICE FOR CERTIFICATION.				