



## Planning Board

### PRELIMINARY SUBDIVISION PLAN APPLICATION (Dover Code, Subdivision of Land Ch. 248-8.)

#### INSTRUCTIONS:

- Complete this form B-1 application
- Submit an Original Reproducible Plan plus eight (8) full size, two (2) 11x17 contact prints to the Planning Board Office or Town Clerk
- Send a PDF of the Application and all Supporting Materials to [planning@doverma.org](mailto:planning@doverma.org)
- A Nonrefundable Application Fee applicable to this Specific Application (See Fee Schedule, Form F) by Check Payable to the Town of Dover

#### PROPERTY INFORMATION:

Address \_\_\_\_\_

Deed of Property recorded in Norfolk District Registry of Deeds

Book \_\_\_\_\_, Page \_\_\_\_\_ and/or

registered in the Registry District of Land Court Certificate of Title No. \_\_\_\_\_,

Registration Book \_\_\_\_\_, Page(s) \_\_\_\_\_

Assessor's Map(s) \_\_\_\_\_, Lot(s) \_\_\_\_\_

#### APPLICANT INFORMATION:

Name(s) \_\_\_\_\_

Relationship to Owner \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Tel # \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Name(s) printed \_\_\_\_\_

Check if Same as Applicant (If checked do not fill out next section)

**PROPERTY OWNER INFORMATION:**

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Tel. # \_\_\_\_\_

By signing below I certify that I am the owner of record of the above referenced property.

Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

Name(s) (printed) \_\_\_\_\_

Name of Subdivision \_\_\_\_\_

Name of Engineer and/or Surveyor \_\_\_\_\_

Tel# \_\_\_\_\_

Email Address \_\_\_\_\_

***Planning Board Use Only:***

Date Submitted \_\_\_\_\_ Action Required By \_\_\_\_\_

**PLANNING BOARD ACTION:**

Date Approved: \_\_\_\_\_ Date Disapproved: \_\_\_\_\_