



PLANNING BOARD
DOVER, MASSACHUSETTS

DETERMINATION OF NEED
FOR SCENIC ROAD HEARING

TO APPLICANT: IF WORK PROPOSED IS ON A SCENIC ROAD (SEE BELOW), CIRCLE CORRECT STREET & RETURN THIS COMPLETED FORM TO THE PLANNING BOARD.

NAME OF APPLICANT: _____ DATE: _____
ADDRESS OF APPLICANT: _____ TEL #: _____

ON PREMISES OWNED BY: _____
STREET NAME & MUNICIPAL # (IF ANY): _____
ASSESSORS MAP & LOT NUMBER(S): _____

A plot plan must accompany this application showing width and exact location of proposed opening, with distances from lot lines and road layout. No driveway will have more than one entrance to a public way or a way approved by the Planning Board.

APPLICANT'S SIGNATURE: _____

OWNER(S) SIGNATURE: _____

Bridge St.	Dover Rd.	Old Meadow Rd.	Strawberry Hill St.
Buttercup Ln.	Farm St.	Pegan Ln.	Taylor Ln.
Centre St.	Glen St.	Pine St.	Walpole St.
Church St.	Hartford St.	Pleasant St.	Wight St.
Claybrook Rd.	Haven St.	Powissett St.	Willow St.
Cross St.	Main St.	Smith St.	Wilsondale St.
Dedham St.	Mill St.	Springdale Ave.	

PLANNING BOARD USE ONLY

_____ SCENIC ROAD HEARING IS REQUIRED ***BEFORE ANY WORK IS DONE IN THE RIGHT OFWAY.*** PLEASE CONTACT THE PLANNING BOARD OFFICE AT (508) 785-0032

_____ SCENIC ROAD HEARING IS NOT REQUIRED.

SIGNED: _____
(TOWN PLANNER)

COMMENTS: