



## PLANNING BOARD

### SCENIC ROAD HEARING APPLICATION

([MGL. CH. 40, SEC. 15C](#))

(Dover Code, CH 245-8A1, a-f)

#### INSTRUCTIONS:

- Complete this Form H
- Submit the following materials with this application
  1. Send a PDF of All Materials to [planning@doverma.org](mailto:planning@doverma.org)
  2. Plan Showing:
    - a. Width and Exact Location of Existing and Proposed Opening
    - b. Distances from Lot Lines and Road Layout
    - c. Existing Stonewalls and Trees, if any
  3. Photos Showing Existing Conditions
  4. Mark Centerline of Driveway Opening on the Ground
  5. Description of Materials to be Used
  6. Check made Payable to the Town of Dover as indicated on the Fee Schedule (Form F) of the Rules and Regulations of the Town of Dover Planning Board

#### PROPERTY INFORMATION

Address \_\_\_\_\_

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

#### APPLICANT INFORMATION:

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

Address \_\_\_\_\_

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

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

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

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

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

## PROPERTY OWNER

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

**Address** \_\_\_\_\_

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

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

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

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

## **Description of Proposed Work**

**Name of Engineer/Surveyor** \_\_\_\_\_

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

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

## **Statement of Purposes for the Change**

- NO DRIVEWAY WILL HAVE MORE THAN ONE ENTRANCE TO A PUBLIC WAY OR A WAY APPROVED BY THE PLANNING BOARD
- APPROVAL OF A SCENIC ROAD PERMIT IS REQUIRED PRIOR TO ANY WORK BEING DONE IN THE RIGHT OF WAY

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**PLANNING BOARD USE ONLY**