SALISBURY PLANNING BOARD

Site Plan Review

Name:	:
Locatio	on:
Addres	ss:
Location: Address: Telephone number: Designated Agent: (name) (telephone number) (address)	
Design	nated Agent:
Address: Telephone number: (name) (telephone number) (address) MATERIALS TO BE FILED WITH THE SITE PLAN REVIEW APPLICATION One (1) copy of the completed Site Plan Review Form Five (5) copies of the Site Plan Three (3) copies of the construction plan Names & Addresses of ALL the Abutters Filing Fee Signature of submitting Party: Box Below for Planning Board use ONLY 1. Filing Date 2. Receipt for Application cost paid 3. Application Accepted 4. Date of Public Hearing 4. Date of Public Hearing	
	One (1) copy of the completed Site Plan Review Form
	_ Five (5) copies of the Site Plan
	_ Three (3) copies of the construction plan
	_ Names & Addresses of ALL the Abutters
	_ Filing Fee
Sianatu	ura of cubmitting Party:
1.	Filing Date