

Case # _____
Date Filed _____
Rec'd By: _____

Town of Salisbury
Application for Agreement & Notice of Limits of Municipal
Responsibility & Liability (ANLMRL)

To: Board of Selectmen

Name of applicant (owner) _____

Address _____

Location of property (to include lot size and road names leading to the property.) Map # ____ Lot # ____

This application is not acceptable unless all required documents are attached. See Instruction Sheet for documentation needed. Additional information may be supplied on a separate sheet if the space provided is inadequate.

1. State Reason Requesting ANLMRL: [detailed info re: building. Attach copy of building permit application]

2. Will this be owner-occupied? If no, why or what is purpose?

[If renting – document renter notified of waiver]

The following should be included with this application:

1. Payment of all associated costs and fees as prescribed by Planning Board regulations.
2. All documentation requested on instruction sheet

Please mail or drop off at the
Salisbury Selectmen's Office
PO Box 214
9 Old Coach Road
Salisbury, NH 03268

By signing this application, I give the Board of Selectmen and other necessary Town Officials permission to visit and inspect the property in question. (or actually have statement BOS and/or other town officials have permission to visit and inspect the property in question.)

Owner's signature _____ Date _____