



Town of Sullivan
SUBDIVISION APPLICATION

Planning Board
 P.O. Box 110
 Sullivan, NH 03445

Application is hereby made to the Planning Board of the Town of Sullivan, Cheshire County, New Hampshire for approval of the plat entitled: _____

Property Information

Map/Lot # _____ Location: _____

Owner Information

Name: _____ Address: _____ Phone # _____

City/State: _____ Zip Code: _____ E-mail: _____

Applicant Information (if different than owner)

Company Name: _____ Address: _____

City/State: _____ Zip Code: _____ Phone # _____

Contact Person for this Project: _____ E-mail: _____

Design Professional (Responsible Surveyor or Engineer)

Name: _____ Address: _____ Phone # _____

City/State: _____ Zip Code: _____ E-mail: _____

Proposed Lots

List the lot numbers and their areas:

Lot _____	Area _____	Lot _____	Area _____
Lot _____	Area _____	Lot _____	Area _____

Water/Sewer Information

Will public water or sewage be connected? _____

Does each lot currently have a water supply? _____

Has this proposed subdivision been approved by the New Hampshire Water Supply and Pollution Control Commission for septic systems? _____

Streets

Will the proposed subdivision require the construction of streets? _____

If so, the proposed street name(s) must be listed on the plat. _____

Other Information

Give a description and location of any structures on the property: _____

Does the owner of record own or have interest in a partnership or corporation owning abutting property: _____

Please give a clear statement as to the purpose of this proposed subdivision: _____

Please attach a list of names and addresses of all the current owners of record for whose property abuts the proposed subdivision. Include any owners whose property is across public highways bordering the proposed subdivision. *Abutters must also be listed on the plat.*

Will any modification of the Subdivision Regulations of the Town of Sullivan be required for the proposed subdivision? _____

If so, please attach a statement giving the reasons for such a request.

I hereby certify that as the applicant, I am the owner of this property [], or the owners authorized agent [](check one). I understand by filing this application with the Sullivan Planning Board, I hereby grant permission for any member of said Board, agents or employees of the Town of Sullivan, or other person the Planning Board may authorize, to enter onto the subject property at all reasonable times for the purpose of examinations, surveys, tests, and inspections as may be appropriate; and release any claim or right I may now or hereafter possess against any of the above mentioned as a result of any examinations, surveys, tests, and inspections conducted on the subject property in connection with this application.

Attest: _____ Date: _____
Signature of applicant