

DOVER CODE

Form D

TOWN DEPARTMENTS REVIEW OF SUBDIVISION PLAN

_____ 20__

TO: Board of Health	Superintendent of Streets
Board of Selectmen	Conservation Commission
Fire Department	Planning Board Consulting Engineer
Police Department	

FROM: Applicant _____

SUBJECT: _____
(Description of the Plan and Date)

1. The subject Plan attached hereto has been submitted to the Planning Board for approval as a Subdivision.
2. For the guidance of the Planning Board, will you please note any appropriate comments or approval on this form or in a separate letter, and/or on the Plan itself. -Please return it to the Planning Board within forty-five (45) days.
3. Under the requirements of MGL, Ch. 41, Sec. 81-U, the Board of Health must notify the Planning Board whether it is in doubt that any land within the Subdivision can be used for building sites without injury to the public health. The Board of Health must report to the Planning Board within forty-five (45) days after receiving this notice.



TO: The Dover Planning Board
Town Hall
Dover, MA 02030

Date: _____, 20__

SUBJECT: _____
(Description of Plan and Date)

The following comments are offered for the guidance of the Planning Board, and/or see attached letter.

Department: _____

By: _____