



PLANNING BOARD
DOVER, MASSACHUSETTS

Form A

**APPROVAL NOT REQUIRED UNDER THE SUBDIVISION CONTROL LAW (ANR)
(MGL. CH. 41, Section 81P)**

DATE SUBMITTED _____

ACTION REQUIRED BY _____

INSTRUCTIONS:

- **File with the Planning Board office or the Town Clerk**
 1. **Two (2) completed Applications Form A's and an Original Reproducible Plan plus two (2) contact prints of the Plan.**
 2. **A non-refundable submission fee applicable to this specific application (See Fee Schedule, Form F) to the Town of Dover and a separate check to secure delivery of prints made after endorsement.**

The application will be receipted to indicate the date of the filing and payment of the submission fee.

APPLICANT INFORMATION:

Name of Applicant _____

Address of Applicant _____

Tel. # of Applicant _____

check if Same as Applicant

Name of Owner _____

Address of Owner _____

Address of Property

Tel. # of Owner _____

Name of Engineer _____

Address of Engineer _____

Tel. # of Engineer _____

PROPERTY INFORMATION:

Deed of Property recorded in _____ Registry, Book _____, Page _____

Assessors Map _____, Lot(s) _____

SCOPE AND PURPOSE OF SUBMITTED PLAN

Applicant's Signature _____

___ check if Same as Applicant

Owner's Signature _____