

MARION PLANNING BOARD FORM 4C

SITE PLAN APPLICATION

Date: \_\_\_\_\_

Applicant (If a corporation, names of President and Principal Contact):

\_\_\_\_\_  
\_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: (h) \_\_\_\_\_ (c) \_\_\_\_\_ E-Mail \_\_\_\_\_

Project Name and Address:

\_\_\_\_\_

Proposed Use:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Acreage of Site: \_\_\_\_\_ Proposed Square Footage: \_\_\_\_\_

Plat: \_\_\_\_\_ Lot: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Fee Submitted (make checks payable to the Town of Marion) \$ \_\_\_\_\_  
(Applicant will be responsible for advertising, mailing cost and review fees, if any)

Names, addresses and phone numbers of the licensed professionals who prepared the site plan:

1. \_\_\_\_\_

2. \_\_\_\_\_

The Applicant requests that the Planning Board proceed with Site Plan Review in accordance with Section 9 of the Zoning By-laws. Documentation attached is required by Form 4B dated \_\_\_\_\_.

Signature of Applicant: \_\_\_\_\_ Date \_\_\_\_\_

Signature of Property Owner: \_\_\_\_\_ Date \_\_\_\_\_