



TOWN OF LITCHFIELD

PLANNING BOARD

**2 LIBERTY WAY, SUITE 1
LITCHFIELD, NH 03052-2345**

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PLAN REVIEW APPLICATION

Date of Application _____

Tax Map(s) / Lot Number(s) of parcel(s) under review (December 1989 Tax Map or later version)

Map ____/ Lot ____ Map ____/ Lot ____ Map ____/ Lot ____ Map ____/ Lot ____

Map ____/ Lot ____ Map ____/ Lot ____ Map ____/ Lot ____ Map ____/ Lot ____

Name(s), address(es) and telephone number(s) of all owners of property listed above.

Name, address and telephone of agent(s) designated by owner(s) in writing to represent them.
Please attach written authorization!

Application For:

- ____ Site Plan - Pre-Application Review
- ____ Site Plan - Regular review
- ____ Site Plan - Expedited review of farm building or minor site plans
- ____ Subdivide ____ lot(s) into ____ lot(s)
- ____ Consolidate ____ lot(s) into ____ lot(s)
- ____ Lot Line Adjustment
- ____ Excavation
- ____ Sign Permit

***** OFFICE USE ONLY *****

Date Received _____

Date Accepted _____

Date Approved/ Disapproved (circle one) _____

Signature _____

Date _____

HCRD Plan Number _____

Date _____